

Nebraska

Risk and Protective Factor Student Survey



State Report 2003



Sponsored by:

Nebraska Partners in Prevention
through funding awarded by
the Substance Abuse and Mental Health
Services Administration
to the Nebraska State Incentive
Cooperative Agreement.

Administered by:

Nebraska Department of Health
and Human Services
and the Nebraska Department of Education

Conducted by:

Bach Harrison L.L.C.

Nebraska Risk and Protective Factor Student Survey

State Report 2003

Sponsored by:
Nebraska Partners in Prevention
through funding awarded by
the Substance Abuse and Mental Health Services Administration
to the Nebraska State Incentive Cooperative Agreement.

Administered by:
Nebraska Department of Health and Human Services
and the Nebraska Department of Education

Conducted by:
Bach Harrison L.L.C.

Table of Contents

Executive Summary	vii
Introduction	1
Section 1: Survey Methods	3
Survey Methods	3
Survey Questionnaire	3
Administration	4
Survey Participants	5
Validity of the Data	5
Section 2: Risk and Protective Factors for Substance Use and Other Problem Behaviors	9
History and Importance of Risk and Protective Factors	9
How to Read the Risk and Protective Factors in This Section	10
Community Risk and Protective Factors	11
Community Risk and Protective Factor Scales	13
Family Risk and Protective Factors	15
Family Risk and Protective Factor Scales	17
School Risk and Protective Factors	19
School Risk and Protective Factor Scales	20
Peer/Individual Risk and Protective Factors	22
Peer/Individual Risk and Protective Factor Scales	25
Section 3: Survey Results	27
Age of Initiation: ATOD Use	27
Lifetime ATOD Use, By Grade	28
30-Day ATOD Use, By Grade	30
Lifetime Use by Gender	32
30-Day Use by Gender	34

Multiple Drug Use	36
Perceived Harmfulness and Availability of Drugs	38
Perception of Peer Use Compared to Actual Personal Use	42
Substance Use in Relation to Perceived Parental Acceptability	44
Lifetime and 30-Day Substance Use as a Function of School Importance	46
Sources and Places of Alcohol and Cigarette Use	47
Age of Initiation: Anti-Social Behaviors	53
Dangerous and Anti-Social Behavior, Perceptions and Attitudes by Gender and Grade	54
Gambling and Problematic Gambling	58

Appendices	63
------------------	----

List of Appendices	63
A. Nebraska Risk and Protective Factor Student Survey	64
B. Risk and Protective Factors and Their Associated Scales	71
C. Nebraska Risk and Protective Factor Student Survey Results, Frequency and Percentage for Each Response Category	75
D. Item Dictionary for the 2003 NRPFS	101
E. Predictors of Cigarette, Alcohol and Marijuana Use	117
F. Description of Profile Reports, Sample Profile Reports by Gender and State Totals	119

Table of Figures and Tables

Executive Summary

Figure 1:	Risk Profiles	ix
Figure 2:	Protective Profiles	x
Table 1:	Percentage of Nebraska Respondents Who Used ATODs During Their Lifetime by Grade	xi
Table 2:	Percentage of Nebraska Respondents Who Use ATODs During the Past 30 Days by Grade	xii

Section 1: Survey Methods

Table 3:	Characteristics of Participants	7
----------	---------------------------------------	---

Section 2: Risk and Protective Factors and Scales

Table 4:	Youth At Risk: Community	11
Table 5:	Community Domain Risk and Protective Factor Scores	13
Figure 3:	Risk Factors: Community Domain	14
Figure 4:	Protective Factors: Community Domain	14
Table 6:	Youth At Risk: Family	15
Table 7:	Family Domain Risk and Protective Factor Scores	17
Figure 5:	Risk Factors: Family Domain	18

Figure 6:	Protective Factors: Family Domain	18
Table 8:	Youth At Risk: School	19
Table 9:	School Domain Risk and Protective Factor Scores	20
Figure 7:	Risk Factors: School Domain	21
Figure 8:	Protective Factors: School Domain	21
Table 10:	Youth At Risk: Peer/Individual	22
Table 11:	Peer/Individual Domain Risk and Protective Factor Scores	25
Figure 9:	Risk Factors: Peer/Individual Domain	26
Figure 10:	Protective Factors: Peer/Individual Domain	26

Survey Results

Table 12:	Age of Initiation: ATOD Use	27
Figure 11:	Average Age of First Substance Use	27
Table 13:	Percentage of Nebraska Respondents Who Used ATODs During Their Lifetime by Grade	28
Figure 12:	Lifetime ATOD Use by Grade	28
Figure 13:	Nebraska 8th Grade ATOD Use Versus the National Average	29
Figure 14:	Nebraska 10th Grade ATOD Use Versus the National Average	29
Figure 15:	Nebraska 12th Grade ATOD Use Versus the National Average	29
Table 14:	Percentage of Nebraska Respondents Who Used ATODs During the Past 30 Days by Grade	30

Figure 16:	30-Day ATOD Use by Grade	30
Figure 17:	Nebraska 8th Grade 30-Day Use Versus the National Average.....	31
Figure 18:	Nebraska 10th Grade 30-Day Use Versus the National Average.....	31
Figure 19:	Nebraska 12th Grade 30-Day Use Versus the National Average.....	31
Figure 20:	Lifetime ATOD Use by Gender	33
Table 15:	Percentage of Males and Females by Grade Who Used ATODs During Their Lifetime.....	33
Figure 21:	30-Day ATOD Use by Gender	34
Table 16:	Percentage of Males and Females by Grade Who Used ATODs During the Past 30-Days	35
Table 17:	Percentage of Students Using Multiple Substances in the Past 30-Days by Grade.....	36
Table 18:	Percentage of Students Using Multiple Substances in the Past 30-Days by Gender.....	36
Figure 22:	Multiple Drug Use	37
Table 19:	Percentage of Nebraska Respondents and MTF Respondents Indicating the Following Drugs Place People at “Great Risk”	38
Figure 23:	Perceived Harm of Using ATODs: Nebraska Compared to National Averages	39
Table 20:	Percentage of Nebraska Respondents and MTF Respondents Indicating the Following Drugs are Easy or Very Easy to Obtain.....	40
Figure 24:	Perceived Availability of Cigarettes, Alcohol, and Marijuana: Nebraska Compared to the National Average.....	41
Table 21:	Percentage of Students Indicating Half or More of Their Peers Use a Substance	42

Figure 25:	Percentage of Students Indicating Half or More of People Their Age Use a Substance: Alcohol, Marijuana, and Methamphetamines.....	43
Figure 26:	Percentage of Students Indicating Half or More of People Their Age Use a Substance: Cigarettes	43
Table 22:	Lifetime Substance Use as a Function of Perceived Parental Acceptance.....	44
Figure 27:	Perceived Parental Acceptance of ATODs by Student’s Actual Lifetime Use	44
Table 23:	30-Day Substance Use as a Function of Perceived Parental Acceptance	45
Figure 28:	Perceived Parental Acceptance of ATODs by Student’s Actual 30-Day Use	45
Table 24:	Lifetime Substance Use as a Function of Reported School Importance.....	46
Figure 29:	Reported Importance of School by Personal Lifetime Use.....	46
Table 25:	30-Day Substance Use as a Function of Reported School Importance.....	46
Figure 30:	Reported Importance of School by Personal 30-Day Use	46
Table 26:	Sources and Places of Alcohol Use.....	48
Figure 31:	Sources of Alcohol - Last Source of Alcohol.....	49
Figure 32:	Places of Alcohol Use - Last Place Used	49
Table 27:	Sources and Places of Cigarette Use.....	51
Table 28:	Alcohol and Tobacco with One or More Adults Present ..	51
Figure 33:	Sources of Cigarettes - Last Source of Cigarettes	52
Figure 34:	Places of Cigarette Use - Last Place Used	52
Figure 35:	Average Age First Performed Anti-Social Behavior.....	53
Table 29:	Age of Initiation: Anti-Social Behaviors	53

Figure 36: Percentage of Students Indicating at Least One Instance of the Behavior in the Past Year (Except Binge Drinking): By Gender	54
Table 30: Percentage of Students Indicating at Least One Instance of the Behavior in the Past Year (Except Binge Drinking): By Gender.....	54
Figure 37: Percentage of Students Indicating at Least One Instance of the Behavior in the Past Year (Except Binge Drinking): By Grade	55
Table 31: Percentage of Students Indicating at Least One Instance of the Behavior in the Past Year (Except Binge Drinking): By Grade	55
Figure 38: Student Attitudes and Perceptions of Issues Surrounding Violence: By Grade	56
Table 32: Student Attitudes and Perceptions of Issues Surrounding Violence: By Grade	56
Figure 39: Student Attitudes and Perceptions of Issues Surrounding Violence: By Gender	57
Table 33: Student Attitudes and Perceptions of Issues Surrounding Violence: By Gender	57
Figure 40: Age of First Gambling	58
Table 34: How Old Were You When You First Gambled	58
Table 35: Gambling Items by Grade and Gender	59
Figure 41: In the Past Year, Have You Gambled for Money or Anything of Value?	59
Figure 42: In the Past 30-Days, Have You Gambled for Money or Anything of Value?	59
Figure 43: In the Past Year, Have You Thought About or Planned to Gamble?	60
Figure 44: In the Past Year, Have You Ever Spent More Than You Planned on Gambling?	60
Figure 45: In the Past Year, Has Gambling Led to Lies	

in Your Family?.....	61
Table 36: Number of Students with Severe Gambling Problems	61
Figure 46: Severe Gambling Problems.....	61
Table 37: Responses to At-Risk Gambling Behaviors - Substance Use.....	62
Table 38: Responses to At-Risk Gambling Behaviors - Anti-Social Behaviors.....	62

Appendix E: Predictors of Cigarette, Alcohol, and Marijuana Use

Table 39: Dependent Variable: 30-Day Cigarette Use	117
Table 40: Dependent Variable: 30-Day Alcohol Use	117
Table 41: Dependent Variable: 30-Day Marijuana Use	118

Executive Summary

Executive Summary

The Nebraska Risk and Protective Factor Student Survey (NRPFSS) was administered in the Fall of 2003 to 25,941 Nebraska students in grades 6, 8, 10, and 12. The survey was designed to assess adolescent substance use, anti-social behavior, and the risk and protective factors that predict adolescent problem behaviors. The Nebraska survey is adapted from a national, scientifically validated survey and contains information on the risk and protective factors that are: 1) locally actionable, 2) not obtainable through any other source, and 3) more highly correlated with substance abuse. One of the goals of the survey was to provide schools and communities with local level data to assist in planning comprehensive, evidence-based prevention initiatives. The NRPFSS is intended to serve as a complementary component of a comprehensive community assessment process that includes multiple data sources: archival and social indicators, assessment of existing resources, key informant interviews, as well as data from this survey.

The NRPFSS was sponsored by Nebraska Partners in Prevention (NePiP), and was administered by the Nebraska Health and Human Service System's Office of Mental Health Substance Abuse and Addiction Services and the Nebraska Department of Education, with assistance from the NePiP Data Monitoring Work Group, the State Survey Design Work Group, the Pacific Institute for Research and Evaluation, the Southwest Prevention Center of the University of Oklahoma; and Bach Harrison, L.L.C.

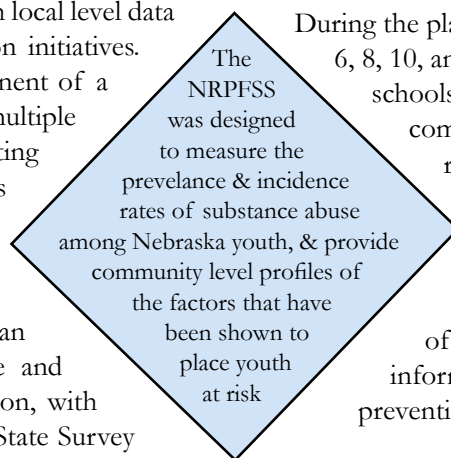
The NRPFSS was designed to measure prevalence & incidence rates of substance abuse among Nebraska youth, & provide community-level profiles of the factors that have been shown to place youth at risk for substance abuse, delinquency, school drop-out, and other problem behaviors. In assessing potential problem behaviors, the survey asked students about recent and lifetime use of alcohol, tobacco and other drugs (ATODs); gambling behavior; and antisocial behaviors

such as violence toward others, theft, and delinquency. The survey also asked students about their sources of alcohol and cigarettes and where they typically used alcohol and cigarettes. The survey also included an assessment of those protective factors that exert a positive influence or buffer against the negative influence of risk, and reduce the likelihood that students will engage in problem behaviors.

Participation by Nebraska Youth

During the planning phase of the survey, all schools with students in grades 6, 8, 10, and 12 were invited to participate in the NRPFSS. While not all schools participated, the fact that 25,941 students across Nebraska completed the survey makes this survey a good estimate of the rates of ATOD use, antisocial behavior, and levels of risk and protection for youth in Nebraska. For the schools and communities that chose to participate in the survey, the results provide information specific to the school and community about the problems faced by youth and their levels of risk and protection. The survey results provide considerable information for communities to use in planning comprehensive prevention initiatives.

For the executive summary, the next section is entitled **Risk and Protective Factor Framework**; for the main report, the next section is entitled **Overview of the Report**.



The Risk and Protective Factor Framework

The 2003 survey administration marks the first statewide effort to utilize the Risk and Protective Factor Framework to guide prevention efforts aimed at reducing youth problem behaviors. Risk factors are characteristics of school, community, and family environments, as well as characteristics of students and their peer groups, that are known to predict increased likelihood of drug use, delinquency, school dropout, teen pregnancy, and violent behavior among youth. Dr. J. David Hawkins, Dr. Richard F. Catalano, and their colleagues at the University of Washington, Social Development Research Group have investigated the relationship between risk and protective factors and youth problem behaviors. For example, they have found that children who live in families with high levels of conflict are more likely to become involved in problem behaviors such as delinquency and drug use than children who live in families with low levels of family conflict.

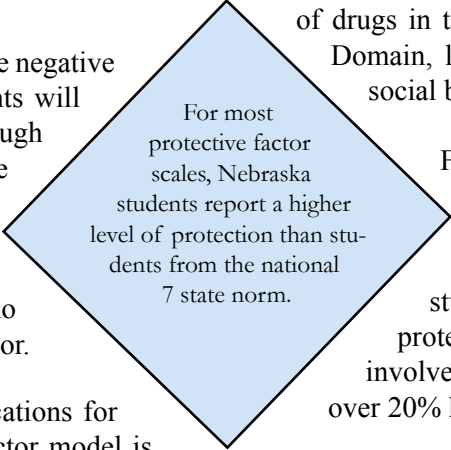
Protective factors exert a positive influence or buffer against the negative influence of risk, thus reducing the likelihood that adolescents will engage in problem behaviors. Protective factors identified through research reviewed by Drs. Hawkins and Catalano include bonding to family, school, community, and peers; healthy beliefs and clear standards for behavior; and individual characteristics. For bonding to serve as a protective influence, it must occur through involvement with peers and adults who communicate healthy values and set clear standards for behavior.

Research on risk and protective factors has important implications for prevention efforts. The premise of the risk and protective factor model is that, in order to promote positive youth development and prevent problem behaviors, it is necessary to address those factors that predict the problem behaviors. By measuring risk and protective factors in a population, prevention initiatives can be implemented that will reduce the elevated risk factors and increase the protective factors. For example, if academic failure is identified as an elevated risk factor in a community, then mentoring, tutoring, and increased opportunities and rewards for classroom participation can be provided to improve academic performance.

In order to make the results of the 2003 NRPFS easier to interpret, risk and protective profiles were developed that show the percentage of youth at risk and the percentage of youth with protection on each scale. Comparisons can be made between youth in a specific area (e.g., a county), all youth in Nebraska, and youth from a national sample (7-state norm). The states upon which the 7-state norm is based include Colorado, Illinois, Kansas, Maine, Oregon, Utah, and Washington.

Figures 1a-d show the percentage of Nebraska students who are at risk for problem behaviors compared to the 7-state norm. In most cases, Nebraska students are less at risk than students in other states. As can be seen in the risk profile chart (Figures 1a-d), the number of at risk areas increases with increasing grade. Nebraska 6th graders are only slightly above the norm in risk due to low commitment to school. Eighth graders are not above the norm on any factor, while 10th and 12th graders are at or above the norm for community disorganization, perceived availability of drugs in the community, parent attitudes favoring drugs in the Family Domain, low commitment to school, and peer attitudes favoring anti-social behavior.

For most protective factor scales, Nebraska students report a higher level of protection (Figures 2a-d) than students from the 7 states. Nebraska students were low in protection only in the case of 12th graders' belief in the moral order. Nebraska students who took the survey indicated the highest level of protection in community and school opportunities for prosocial involvement, as well as social skills. Nebraska students were often over 20% higher than the norm in these domains.



For most protective factor scales, Nebraska students report a higher level of protection than students from the national 7 state norm.

Figure 1

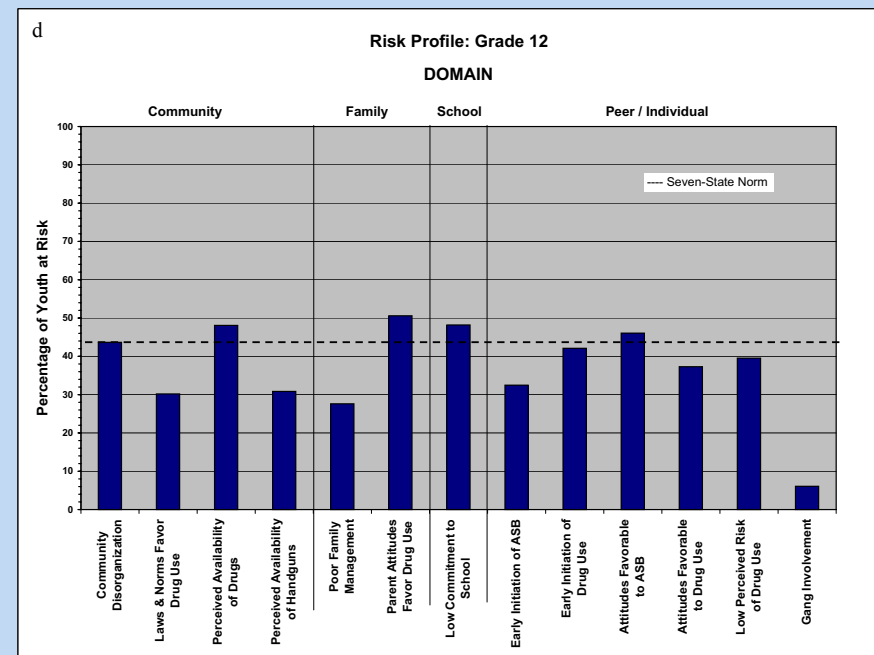
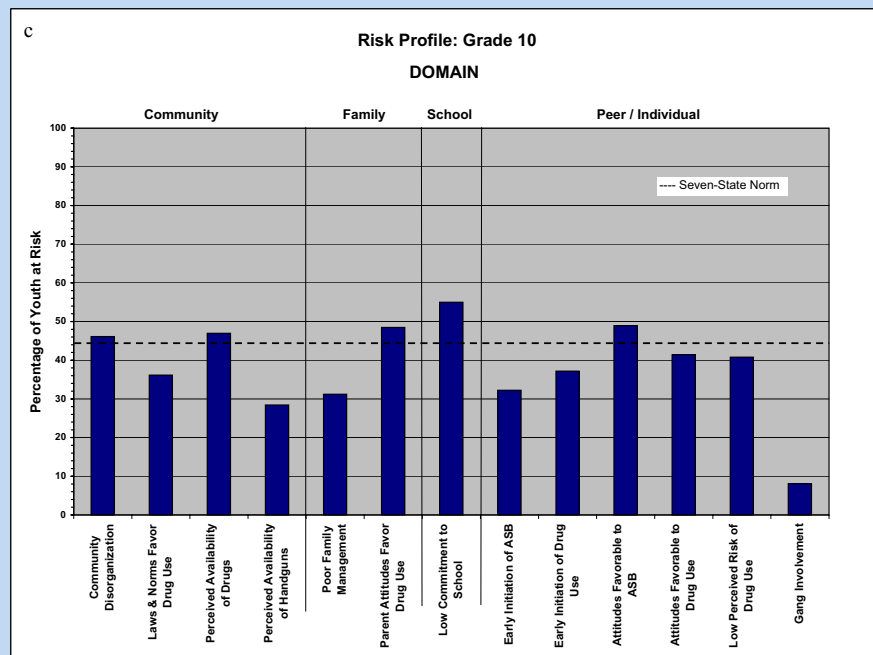
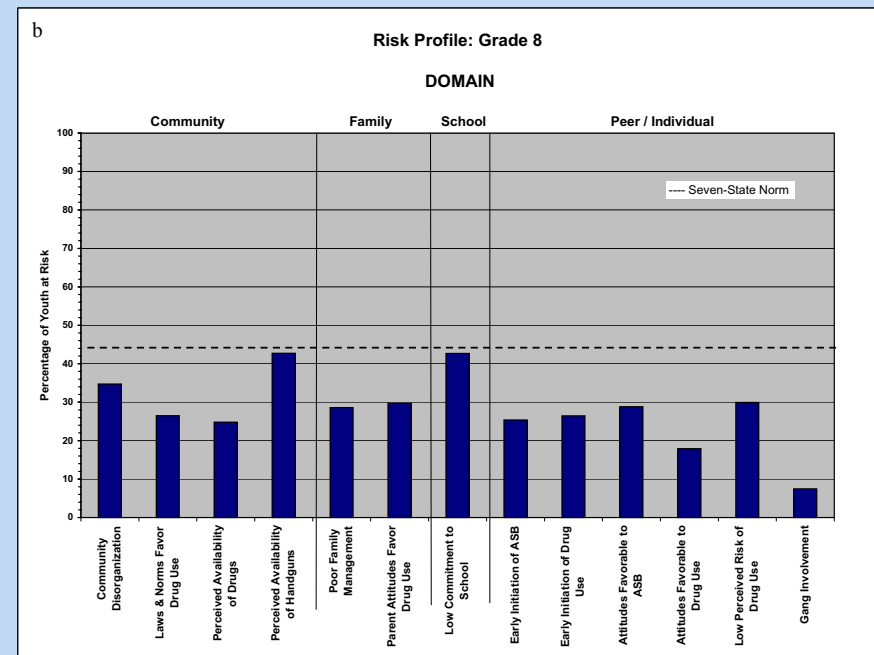
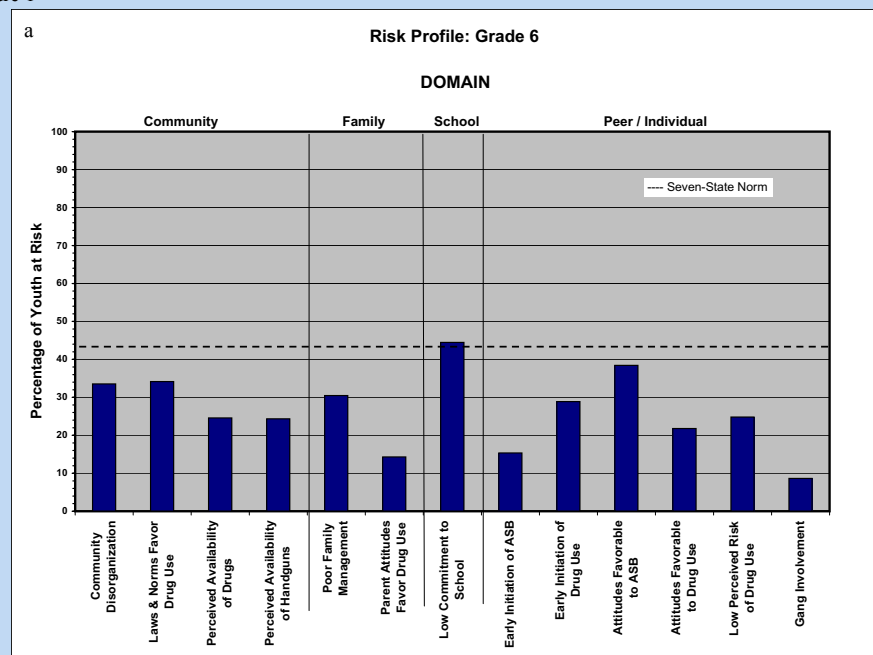
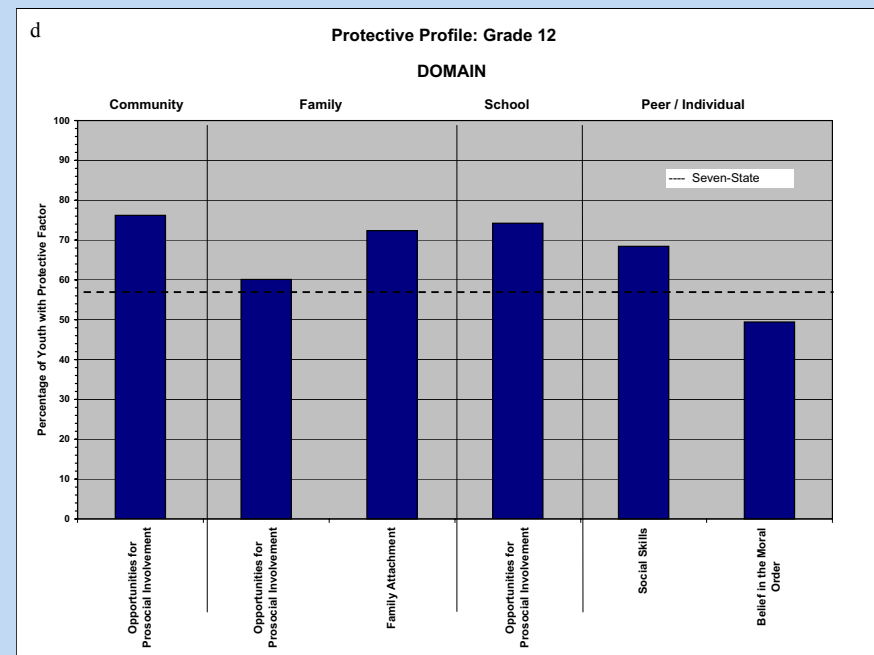
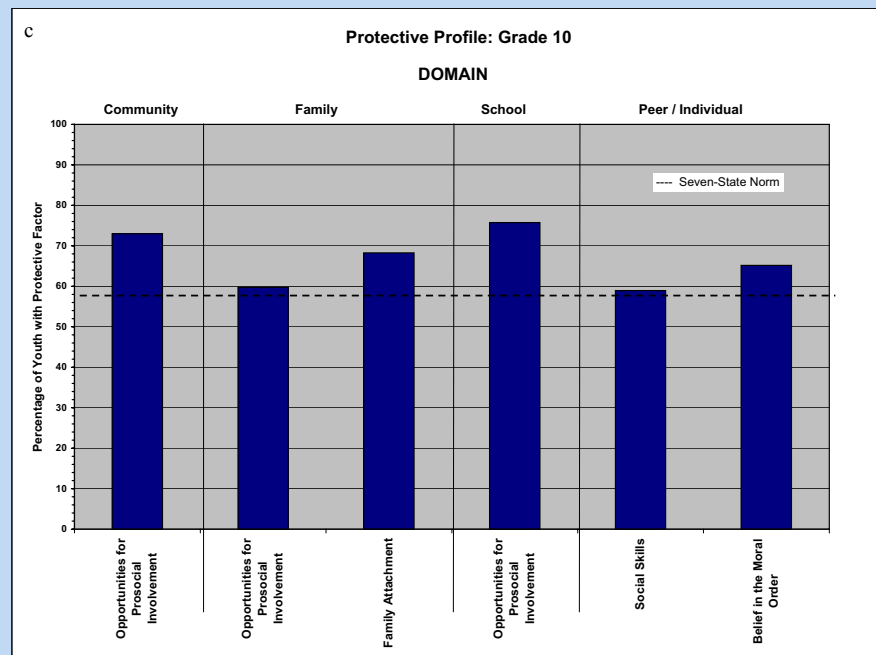
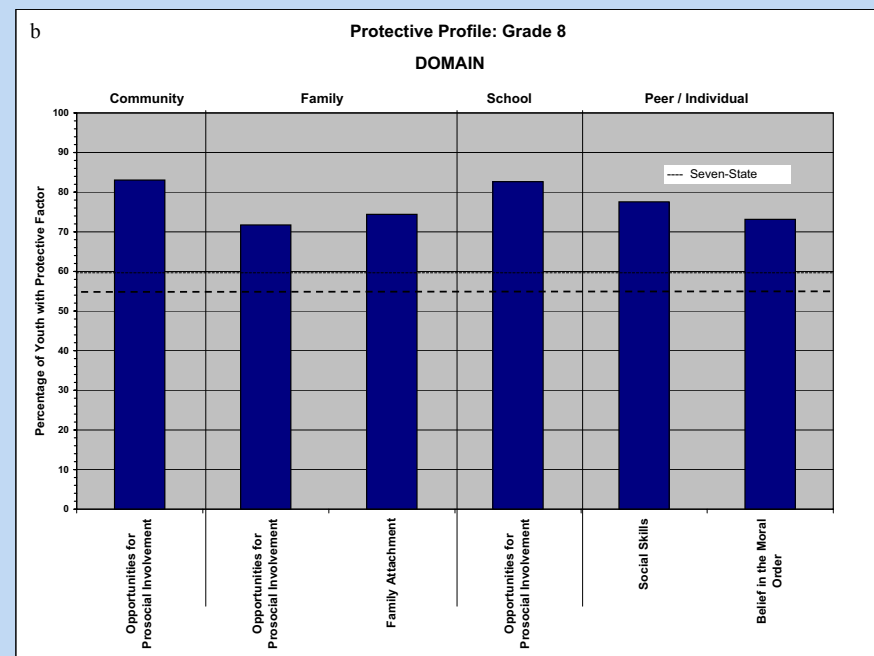
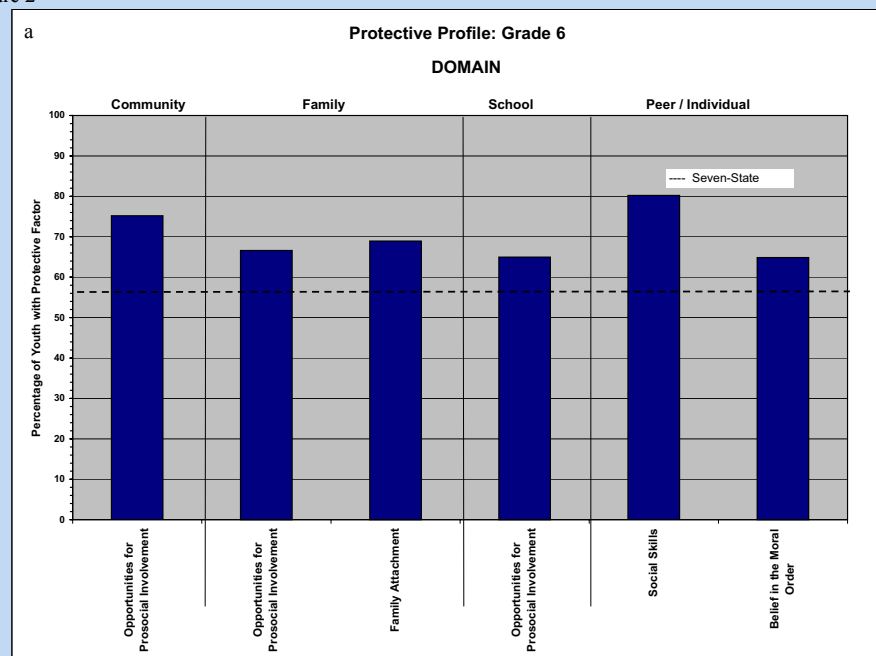


Figure 2



Age of Initiation: ATODs

Nebraska students begin using cigarettes before using any other substance. Of the students who had used cigarettes, the average age of first reported use was 12.5 years. A period of almost 2 years separates the reported age of first sip of alcohol and the first regular alcohol use, with the first sip occurring at 12.8 years, and the first regular use of alcohol at 14.6 years. Of the students who had used marijuana, the average age of first use was 13.9 years -- less than a year before students indicated that they had begun drinking regularly.

Substance Use Rates By Grade

Table 1 shows the percentages of Nebraska students in grades 6, 8, 10 and 12 who used the ATODs selected for assessment in the Nebraska Risk and Protective Factor Student Survey (NRPFS) at some time during their life. Lifetime use is a measure of the percentage of students who tried the particular substance at least once in their life and is used to show the level of experience with a particular substance.

The results of the Nebraska survey are compared to a national survey that is conducted each year by the University of Michigan called Monitoring the Future (MTF). The latest results of the MTF Survey are for 2002. The MTF only surveys students in grades 8, 10, and 12.

A review of Table 1 shows that for almost all substances, Nebraska students reported less lifetime use with a given drug than other students in the nation, as compared to MTF data. For alcohol, marijuana, inhalants, hallucinogens, and cocaine, Nebraska students in all grades use at a rate lower than students nationally. Alcohol use is below the MTF sample for all grades, but increasingly gains on the national average as grade increases. Smokeless tobacco use and cigarette use are lower than the national average in grade 8, but greater than the national average in 10th and 12 grade. Smokeless tobacco use is particularly high in 12th grade relative to the MTF sample.

Use in the past thirty days is a measure of the percentage of students who used a substance at least once in the 30 days prior to taking the survey, and is a more sensitive indicator of the level of current use of the substance. When looking at

the Nebraska and MTF past 30-day survey results (Table 2), Nebraska students across all grades are below the national average in cocaine, hallucinogen, and marijuana use, but are higher than the national average in inhalant use (again, across all grades). Nebraska students begin using alcohol, cigarettes, and smokeless tobacco at a rate lower than the national average, but use rates for these substance increase by grade, and surpass the national average by grade 10. By grade 12, 30-day smokeless tobacco use is twice the national average.

For marijuana use rates in their lifetime and in the past 30-days, Nebraska students are well below the national average. For lifetime use, marijuana use rates are at least 11% below the national average, and, for 30-day use rates, Nebraska marijuana use rates are at least 4% below the national average. For all other substances, when Nebraska use rates pass the national average, they do so by only .2% in the case of lifetime alcohol and cigarettes use, and by less than 1.5% for 30-day use of the same substances.

Question	Grade 6	Grade 8		Grade 10		Grade 12		Total Nebraska Sample
	Nebraska	Nebraska	MTF	Nebraska	MTF	Nebraska	MTF	
Alcohol	20.7	41.7	47.0	64.8	66.9	78.2	78.4	51.4
Cigarettes	11.7	25.6	31.4	43.1	47.4	57.4	57.2	34.3
Smokeless Tobacco	4.7	9.3	11.2	19.3	16.9	30.1	18.3	15.6
Marijuana	2.4	8.5	19.2	24.8	38.7	36.0	47.8	17.5
Inhalants	10.1	13.5	15.2	11.9	13.5	10.3	11.7	11.6
Hallucinogens	0.4	1.3	4.1	2.9	7.8	4.7	12.0	2.2
Cocaine	0.3	1.0	3.6	3.6	6.1	5.0	7.8	2.7
Methamphetamines	0.5	1.5	---	3.6	---	5.5	---	2.4
Any Drug	13.6	21.3	24.5	34.5	44.6	42.9	53.0	28.0

The symbol --- is used to indicate an area where MTF data is not available.

Question	Grade 6	Grade 8		Grade 10		Grade 12		Total Nebraska Sample
	Nebraska	Nebraska	MTF	Nebraska	MTF	Nebraska	MTF	
Alcohol	6.5	18.1	19.6	36.2	35.4	48.9	48.6	27.4
Cigarettes	2.6	7.7	10.7	19.3	17.7	28.0	26.7	14.1
Smokeless Tobacco	1.3	3.2	3.3	8.2	6.1	13.4	6.5	6.4
Marijuana	0.9	4.0	8.3	11.9	17.8	15.6	21.5	7.9
Inhalants	4.4	5.7	3.8	3.6	2.4	2.2	1.5	4.0
Hallucinogens	0.3	0.6	1.2	1.0	1.6	1.3	2.3	0.8
Cocaine	0.2	0.4	1.1	1.2	1.6	1.7	2.3	0.8
Methamphetamines	0.2	0.7	---	1.0	---	1.3	---	0.8
Any Drug	6.3	10.4	10.4	17.6	20.8	20.4	20.4	13.6

The symbol --- is used to indicate an area where MTF data is not available.

Substance Use by Gender

In Nebraska, male and female students who took the survey reported very similar rates of substance use for most substances. The largest gender discrepancy occurs for smokeless tobacco use; males are almost 3 times more likely to use smokeless tobacco (23.2% versus 8.2%, respectively). Males also use slightly more marijuana (18.8% versus 16.7%) and inhalants (12.6% versus 10.4%). Females, however, are slightly more likely to use cigarettes 34.8% versus 34.3%) and methamphetamines (2.7% versus 2.2%). Thirty-day use follows the same general pattern.

Predictors of Cigarette, Alcohol, and Marijuana Use

Regression analyses were conducted to test what variables were the best predictors of recent, or 30-day use of alcohol, cigarettes, and marijuana. For all three substances, the student's own attitude toward use of the substance was the best predictor of use (i.e., it accounted for the most variance in 30-day use). For cigarette use and marijuana use, but not alcohol use, the parents' attitude toward use was the second best predictor of actual student use.

Multiple Drug Use

Across both grade and gender, alcohol and tobacco were the substances most likely to be used jointly. Alcohol and marijuana were second most likely, followed by marijuana and tobacco. Gender differences in multiple drug use were quite small, and never surpassed .3%; however, whenever one gender did use more of a combination than the other, males were the greater users.

Perceived Harmfulness of Drugs: Nebraska Compared to National Sample

For perceived harm in trying marijuana once or twice, smoking marijuana regularly, and heavy drinking, Nebraska students compared favorably to the national average, perceiving greater potential harm than the national average in all cases. As with the national average, however, perceived harm associated with a substance declined with increasing grade. Nebraska did not compare favorably to the national sample in the perception of harm in smoking one or more packs of cigarettes per day. In the national sample, perceived harm increased with increasing grade (from 57.5% in grade 8 and 64.3% in grade 10 to 66.8% in grade 12); alternatively, in the Nebraska sample, perceived harm decreased slightly with increasing grade (from 71.0% in grade 8 and 68.9% in grade 10 to 66.8% in grade 12).

Perceived Availability of Drugs: Nebraska Compared to National Sample

Nebraska students perceive all substances as more difficult to obtain than the national average (i.e., they perceive them as less easily obtained). Just as in the national sample, however, perceived ease of obtaining a drug increases with increasing grade. Alcohol and cigarettes are perceived as more easily obtained than marijuana.

Perception of Peer Use Compared to Actual Personal Use

To assess the effects of perception of peer use, those Nebraska students who reported perceiving that more than half or almost all of their peers used ATODs were examined in terms of their own lifetime use. Findings indicate that, for all substances, students who perceived that more than half of their peers used substances were more likely to report higher rates of substance use themselves. As an example, among students who never used alcohol, only 21.6% felt more than half their peers used. For those who used alcohol on 10 or more occasions, perceived peer use jumped to 78.7%.

Substance Use in Relation to Perceived Parental Acceptability

Both lifetime and 30-day use of cigarettes, alcohol, and marijuana increase dramatically with even the smallest perception of parental acceptability. Students who perceive their parents as believing the use of a substance is “Very Wrong” reported ATOD use at a rate less than 50%-and sometimes less than 25%-of the use reported by those students who perceived parental acceptability as “Wrong,” “A Little Wrong,” or “Not At All Wrong.” For example, marijuana use among students who reported that their parents feel use is “Very Wrong” is 13.2%. For all other categories (i.e. “Wrong,” “A Little Wrong” and “Not At All Wrong”), more than 58% of students reported using marijuana.

Substance Use as a Function of Reported School Importance

Analysis of the NRPFS data found a direct correlation between substance abuse and reported school importance. The less a student reported feeling school was important, the more likely he or she was to report use of alcohol, cigarettes, and marijuana. This was true of both lifetime and 30-day use.

Sources and Places of Alcohol and Cigarette Use

Beginning with sources of alcohol, the most likely source for students of all grades is from someone over 21. This source is more heavily utilized the older students get (76.8% by grade 12). For younger students, obtaining alcohol from home

with parental permission (34.6%) and from relatives (29.3%) are most common. These sources are utilized less frequently with increasing grade level. Alcohol is most often used by older students in someone else’s home (78.2%), while it is most often used by younger student’s in their own homes (58.6%). Other places of potential use, such as open areas, sporting events, restaurants and bars, hotels and cars, all grow in frequency of use with increasing grade. The likelihood of an adult being present during use declines with increasing grade (from 60.5% in grade 6 to 37.3% in grade 12).

The most frequent source of cigarettes reported by Nebraska youth is from someone 18 or older and from someone under 18. These sources increase in utilization through grade 10, but then decline as sources in grade 12. By grade 12, many students are 18, and by then the most frequent source is students buying cigarettes for themselves without a fake ID (32.2%). For younger students, vending machines (24.6%) and from the parents home without permission (32.7%) are common sources of cigarettes. These sources decline in importance with increasing grade. Cigarettes are most often reported smoked in one’s home, someone else’s home, or in an open area. Smoking in motels, restaurants or bars, as well as sporting events increases with increasing grade. Smoking in a car, however, shows the most dramatic growth with increasing grade, increasing in 12th grade frequency by 3.5 times the 6th grade level (from 20.4% to 70.0%). Finally, parents are more likely to be present while students smoke with increasing student grade.

Age of Initiation: Anti-Social Behaviors Report

The majority of Nebraska youth who report anti-social behaviors report beginning such behaviors between 12 and 12.5 years of age. The order in which the anti-social behaviors were performed follows a somewhat intuitive pattern. Although separated by less than a month in all cases, students seem to join a gang first (12.2 years). Shortly after that comes the first time carrying a handgun (12.3), and then attacking someone (12.4). Suspension occurs fourth, and first arrest (13.5) occurs one-year after suspension (12.5).

Dangerous and Anti-Social Behaviors, Perceptions, and Attitudes by Gender and Grade

Dangerous and anti-social behaviors were examined in terms of students reporting at least one instance of the behavior. In almost all cases, males were more likely to perform a dangerous or anti-social behavior, and were particularly more likely to be suspended (9.6% versus 3.9%), carry a handgun (9.7% versus 2.0%), sell drugs (5.2% versus 2.5%), or attack someone (11.7% versus 6.1%). They were only slightly more likely to binge drink and drink and drive. Females, however, were more likely than males to ride with a drunk driver (42.8% versus 36.5%). This was the most common dangerous or anti-social behavior across gender and grade. Alcohol related issues in general became more prominent with increasing grade. The most common behaviors, binge drinking, driving drunk, and riding with a drunk driver all became increasingly more likely as students increased in grade. Selling drugs, being arrested, and being drunk or high at school also became more likely with increasing grade, but were comparatively much more rare than the other issues.

Student attitudes and perceptions of violence issues also display some linear trends. For example, the older a student is, the more likely he or she is to report greater ease in obtaining a handgun (from 12.8% in grade 6 to 28.2% in grade 12). The likelihood of pushing someone back who pushed them also grows with increasing grade (from 5.4% in grade 6 to 9.6% in grade 12), as does the opinion that it is not wrong to pick a fight (from 2.5% in grade 6 to 5.5% in grade 8, 7.0% in grade 10, and 5.2% in grade 12). Relative to older students, younger students have more faith in the police department's ability to catch a kid carrying a gun, but also feel less safe in their neighborhoods. When examined in terms of gender, males hold attitudes and perceptions that are more favorable toward violence. Males find obtaining a handgun to be twice as easy as do females (27.2% versus 15.3%), and are several times more likely to push someone back who pushed them (14.4% versus 3.1%). Males are also twice as likely as females to feel it is okay to pick a fight or attack someone. They are more likely to have belonged to a gang and are slightly less likely to feel safe in their neighborhoods. Finally, males are also more likely to feel it is okay to take a handgun to school, but both genders agreed with this attitude at a rate of less than 1.0%.

Gambling and Problematic Gambling

Among females, the majority (63.5%) report having never gambled, and over 1/3 (35.9%) of males report having never gambled. Among the students who reported gambling, most reported the age at which they began gambling as 10 or younger.

Males are more than twice as likely as females to have gambled for money in the past year and the past 30-days. They are almost 3 times more likely to have thought about or planned to gamble (25.3% versus 8.6%) and to have exceeded their budget when gambling (8.7% versus 2.4%). Although infrequently reported by both genders, males are more likely to report gambling having led to lies to their families. Lifetime gambling for money and 30-day gambling for money both increase with increasing grade. Planning to gamble and overspending on gambling also increase in likelihood with increasing grade. The frequency of gambling leading to lies, however, decreases with increasing grade.

Severe problematic gambling was examined by adding the total number of "yes" responses participants made to the items assessing thinking about gambling, overspending on gambling, and lies due to gambling. A "yes" response to two or more items was not common, but 3 times more likely for males than for females. "Yes" responses to two items increased slightly with increasing grade (from 3.5% in grade 6 to 4.1% in grade 12), but "yes" responses to three items remained stable at approximately 1.0% of the entire surveyed population.

I Introduction

The Nebraska Risk and Protective Factor Student Survey (NRPFSS) was administered in the Fall of 2003 to 25,941 Nebraska students in grades 6, 8, 10, and 12. The survey was designed to assess adolescent substance use, anti-social behavior, and the risk and protective factors that predict adolescent problem behaviors. The Nebraska survey is adapted from a national, scientifically validated survey and contains information on the risk and protective factors that are 1) locally actionable, 2) can not be obtained through any other source, and 3) are more highly correlated with substance abuse. One of the goals of the survey was to provide schools and communities with local level data to assist in planning effective prevention services. However, when planning prevention services, providers are urged to collect and use multiple data sources--archival and social indicators, assessment of existing resources, key informant interviews, as well as data from this survey.

The NRPFSS was sponsored by Nebraska Partners in Prevention (NePiP), and was administered by the Nebraska Health and Human Service System's Office of Mental Health Substance Abuse and Addiction Services and the Nebraska Department of Education, with assistance from the NePiP Data Monitoring Work Group, the State Survey Design Work Group, the Pacific Institute for Research and Evaluation, the Southwest Prevention Center of the University of Oklahoma; and Bach Harrison, L.L.C.

The NRPFSS was designed to measure the prevalence & incidence rates of substance abuse among Nebraska youth, & provide community-level profiles of the factors that have been shown to place youth at risk for substance abuse, delinquency, school drop-out, and other problem behaviors. In assessing potential problem behaviors, the survey asked students about recent and lifetime use of alcohol, tobacco and other drugs (ATODs); gambling behavior; and antisocial behaviors such as violence toward others, theft, and delinquency. The survey also asked students about their sources of alcohol and cigarettes and where they typically used alcohol and cigarettes. The survey also included an

assessment of those protective factors that exert a positive influence or buffer against the negative influence of risk, and reduce the likelihood that students will engage in problem behaviors.

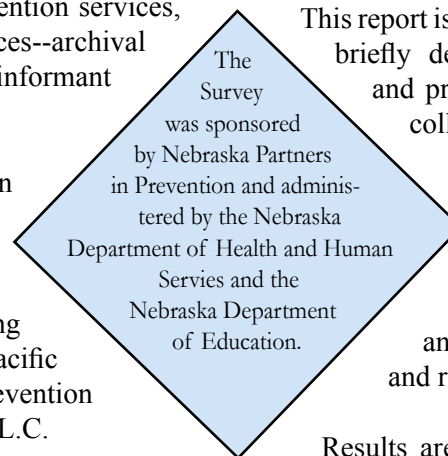
Overview of the Report

This report is divided into three sections. The first section, **Survey Methods**, briefly describes how the survey was conducted, who participated, and procedures that were used to ensure that valid information was collected.

The second section, **Risk and Protective Factors for Substance Abuse and Problem Behaviors**, provides a description of the Risk and Protective Factor Model of substance abuse prevention, including the four domains of risk and protection (community, family, school, and peer/individual), and risk and protective factor results for each of the four domains.

Results are presented for each grade and, in some cases, by gender. A description of the scale scores that are used to quantify levels of risk and protection and determine the percentage of youth at risk for problem behaviors are also included.

The third section, **Survey Results**, describes ATOD use, anti-social behavior, and other substance abuse issues measured by the NRPFSS. The survey presents results on the current use (use in the 30 days prior to the survey) and lifetime use of eight different substances, as well as "Any drug," which is defined as using one or more of the eight drugs measured by the survey (with the exceptions of alcohol



and tobacco). These results are also compared to the results of a national survey, Monitoring The Future (MTF). This section also includes an assessment of how substances were obtained and where they were commonly used. Additional analyses include explanation of student attitudes about the perceived harmfulness and availability of drugs, and student behaviors and attitudes regarding handguns, violence and gambling.

Section 1: Survey Methods

Survey Methods

The NRPFSS was designed to serve as a local data collection tool that could help communities analyze existing rates of youth substance abuse and underlying causal factors. While not all of the communities in Nebraska participated in the initial administration of the 2003 survey, those that did now have access to a rich source of information about the use of ATODs, antisocial behavior, and the risk and protective factor profiles for their communities. The remainder of this section will discuss the survey questionnaire, how it was administered, completion rates, the demographics of participants, the validity of the results, and the ability to generalize the results to other populations.

Survey Questionnaire

The NRPFSS was developed by the Nebraska State Survey Design Work Group, which was composed of State Agency staff, school administrators and the senior scientists from Pacific Institute for Research and Evaluation. They began with a national risk and protective factor survey questionnaire and adapted it for Nebraska. The national survey was one that was developed through the combined efforts of six states (Kansas, Maine, Oregon, South Carolina, Utah, and Washington) and the Social Development Research Group at the University of Washington. The collaborative survey development process was a project called the Six-State Consortium which was funded by the Center for Substance Abuse Prevention (CSAP) and the Substance Abuse and Mental Health Services Administration (SAMSHA). The goal of the Consortium was to develop a survey that provided scientifically sound information about ATOD use, antisocial behavior, and the levels of risk and protection in a community.

The NRPFSS was created by reducing the number of scales to questions of the

Six-State Consortium Risk and Protective Factor Survey to focus on collecting information on those risk and protective factors that are 1) locally actionable, 2) cannot be obtained through any other source, and 3) are more highly correlated with substance abuse. In addition, the Nebraska State Survey Design Work Group included validated scales on gambling and source and place of use for alcohol and tobacco. The reader may refer to Appendix A for a copy of the Nebraska questionnaire.

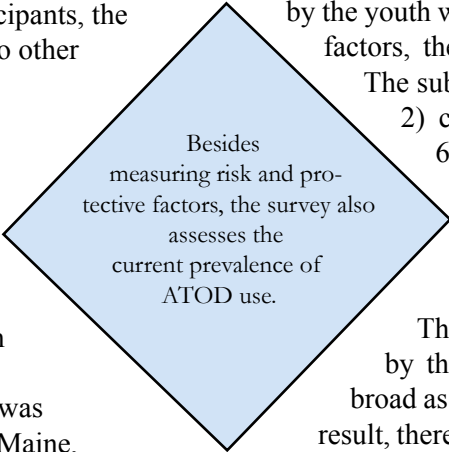
Risk and protective factors are characteristics of a community that are reported by the youth who complete the survey. Besides measuring risk and protective factors, the survey also assesses the current prevalence of ATOD use.

The substances measured by the Nebraska survey include: 1) alcohol, 2) cigarettes, 3) smokeless tobacco, 4) marijuana, 5) inhalants, 6) hallucinogens, 7) cocaine, and 8) methamphetamines. The questions that ask about substance use are similar to those used in the national survey, Monitoring the Future (MTF), in order to allow comparisons between the two surveys.

There are a total of 9 risk factors and 6 protective factors measured by the survey. However, some of the risk factors are sufficiently broad as to require more than one scale for adequate measurement. As a result, there are 12 separate risk factor scales and 6 protective factor scales.

Appendix C provides a complete list of the risk and protective factors and the corresponding risk and protective factor scales in the survey.

Before the percentage of youth at risk on a given scale could be calculated, a scale value or cut-point needed to be determined that would separate the at-risk group from the not-at-risk group. Because the Six-State Consortium Risk and Protective Factor Survey has been given to over 200,000 youth nationwide, it was possible to select two groups of youth, one that was more at risk for problem behaviors and another group that was less at risk. A cut-point score was then determined for each risk and protective factor scale that best divided the youth



Besides measuring risk and protective factors, the survey also assesses the current prevalence of ATOD use.

from the two groups into their appropriate group, more at-risk or less at-risk. The criteria for selecting the more at-risk and the less at-risk groups included ATOD use (the more at-risk group had more regular use, the less at-risk group had no drug use and use of alcohol or tobacco on only a few occasions) and antisocial behavior (the more at-risk group had two or more serious delinquent acts in the past year, the less at-risk group had no serious delinquent acts).

The cut-points that were determined by analyzing the results of the more at-risk and less at-risk groups will remain constant and will be used to produce the profiles for future surveys. Since the cut-points for each scale will remain fixed, the percentage of youth above the cut-point on a scale (at-risk) will provide a method for evaluating the progress of prevention programs over time. For example, if the percentage of youth at risk for poor family management prior to implementing a community-wide family/parenting program was 50% and then decreased to 45% one year after the program was implemented, the program would be viewed as helping to reduce problems with poor family management.

There are approximately four survey items that measure each risk factor. The overall survey has 94 questions, however, many of the questions have multiple components so students actually responded to 177 total items. The questions were printed in a test booklet that was machine scoreable (The reader may refer to Appendix A for a copy of the 2003 Nebraska NRPFS). Students from all grades were able to complete the questionnaire in one class period. A complete item dictionary that lists the risk and protective factor scales and the items they contain, as well as the outcome variables, can be seen in Appendix E.

Administration

The NRPFS was administered to both public and private schools across the state of Nebraska in October 2003. All schools with students in grades 6, 8, 10 and 12 were invited to take part in the survey. Participation at the school and personal level was completely voluntary, as both schools and students could decline participation. Although participation was voluntary, the importance of statewide participation in order to allow for accurate representation of all areas was stressed. Benefits of participation were presented to school authorities.

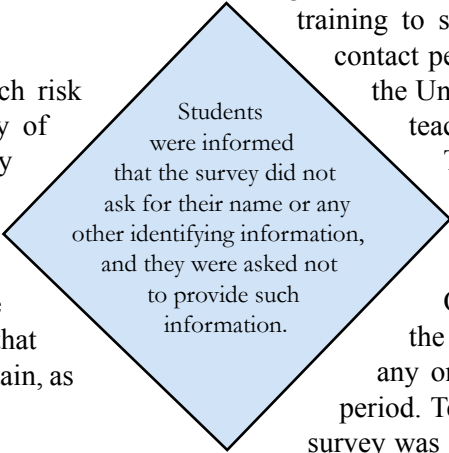
Objectives included improved prevention planning and strategy selection based on objective need, and helping schools establish quantitative goals.

Before survey administration began, the actual NRPFS questionnaire was made available for review by school authorities, as was a “fact sheet” explaining the goals, background, and need for the survey. After reviewing the survey and fact sheet, school authorities made the decision of whether to participate. School officials also had the opportunity to aggregate survey data as best fit their data collection needs. Some chose to aggregate data by school building, others by school district. In some communities, private and public school districts aggregated their data together. In other cases, multiple school districts aggregated their data to create county and multi-county level data reports.

Once participating schools were identified, local planning for survey administration began. Each school was asked to assign a contact person who would receive training to support survey administration. In addition, each school, and contact person within a school, was asked to work with a contractor at the University of Oklahoma who would be responsible for providing teachers in participating schools with materials and instructions. The survey used a passive consent format whereby parents were notified of the survey and provided an opportunity to decline their student’s participation.

Once actual survey administration began, teachers administered the 30-minute long survey during regular class periods. Within any one school, surveys were administered during a specific class period. Teachers provided instructions and answered questions, but the survey was self-administered and was completely paper and pencil-based.

Instructions to the students clearly stated that the survey was completely anonymous. Students were informed that the survey did not ask for their name or any other identifying information, and they were asked not to provide such information. Once students had completed the survey, all survey materials were gathered and placed in a sealed, pre-posted envelope. All surveys were then mailed to Bach Harrison, L.L.C. The Utah-based program evaluation firm scanned all surveys, analyzed all data, and generated reports for the state, regional and local level. The information found in this report is an explanation of statewide data related to the NRPFS.



Students were informed that the survey did not ask for their name or any other identifying information, and they were asked not to provide such information.

Survey Participants

Not all schools or students participated in the survey. Students and their parents were given the option not to participate, or to actively withhold consent for student participation. Other students were absent when the survey was administered. There were a total of 25,941 students in 65 counties who completed the 2003 Nebraska Risk and Protective Factor Survey. All together, 146 public and private school districts participated in the 2003 survey in the state of Nebraska.

It should be noted that not all of the surveys that were completed contained valid information. Some surveys were eliminated because students were deemed not truthful in their responses, or did not complete some of the most pertinent demographic questions (see **Validity of the Data** section for the validity criteria).

The characteristics of the sample of Nebraska youth who took the 2003 NRPFS survey are presented in Table 3. According to the Nebraska Department of Education, there were approximately 87,568 students in Nebraska grades 6, 8, 10, and 12 in 2003. Of these, 25,941 completed all required parts of the survey and were also deemed honest. Thus, the Nebraska sample assessed in this survey represented approximately 30% of the eligible Nebraska students. The survey population itself was comprised of 55.1% males and 44.9% females. White students were the largest ethnicity represented in the sample at 91.7%, followed by “Other” at 4.7% and Native Americans at 2.9%. All other ethnicities represented less than 2% of the sample (African Americans and Asians were each 1.0% of the sample). This demographic breakdown is similar to the demographics of the Nebraska school system (available at <http://reportcard.nde.state.ne.us/Page/DemoEthnicity.asp?Level=st>). According to the Nebraska Department of Education website, 80.6% of the K - 12 2003 Nebraska student population was White, while 1.6% were Native American and 7.0% were African American. The similarity in survey respondents increases the ability to apply the results from the NRPFS survey to youth across the state.

An analysis of student living context indicated that the majority (73.5%) of the surveyed students lived in a city. Next were those who reported living on a

farm (13.9%), followed by those reporting living in the country (11.52%) and reservation (1.1%).

Validity of the Data

The information presented in this report is based entirely on the truthfulness, recall, and comprehension of the youth who participated in the survey. Many studies have shown that most adolescents are truthful in their responses to the questions on similar surveys. For example, ATOD trends for repeated national and state surveys are very similar. Also, the changes reported by youth parallel the changes during the same period in adolescent admissions to treatment for substance abuse. Finally, the relationships between different kinds of behaviors and the problems adolescents report is very consistent over a wide range of studies. This study was carefully designed to ensure honest responses from participants.

The confidentiality of the survey was stressed through the instructions and administration procedures. Participants were assured that the survey was voluntary, anonymous, and confidential. They were told that no one would see their answers and that there was no way that a survey could be traced back to an individual student. Because the survey was anonymous, most of the reasons to exaggerate or deny behaviors were eliminated. However, several checks were built into the analysis to minimize the impact of students who were not truthful in their responses. Students whose surveys were deemed not truthful were eliminated.

Before data cleaning, there were a total of 27,634 survey questionnaires completed. However, not all of the questionnaires were deemed to contain valid information. Of these surveys, 830 (3.0%) were eliminated because respondents were determined to be dishonest. These surveys were eliminated because of four predetermined dishonesty indicators: 1) the students indicated that they were “Not honest at all” in completing the survey (287 surveys); 2) the students indicated that they had used the non-existent drug, Derbisol (589 surveys); 3) the students reported an impossibly high level of multiple drug use (213 surveys); and 4) the students reported an age that was inconsistent with their grade (105 surveys).

The total number of students dishonest on indicators 1 to 4 does not add to 830 because some respondents were dishonest on more than one honesty indicator.

There were 897 (3.2%) surveys where students did not answer enough of the validity questions to determine whether or not they were honest in their responses. These surveys were not included in the final analyses. Because all of the analyses require a knowledge of the student's grade, 1231 (4.4%) additional surveys were eliminated because they did not complete the grade question. After applying all of the validity criteria, a total of 1693 (6.1%) questionnaires were eliminated from most analyses. This is less than the sum of those eliminated according to the individual criteria cited above because many of those eliminated met more than one criteria for elimination.

Other measures to reduce response bias included carefully pre-testing the questionnaire to ensure that students understood the meaning of each question, using a well developed and tested administration protocol, and reading the same instructions to all students who participated in the survey.

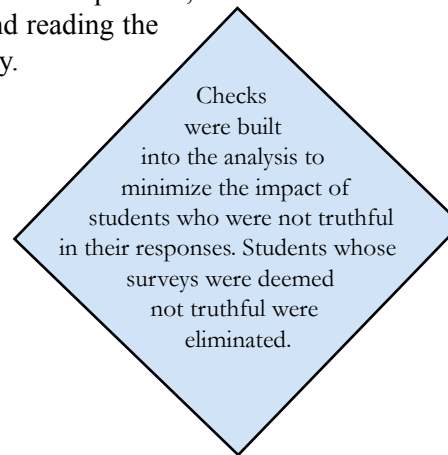


Table 3. Characteristics of Participants*

Year of Survey	2003							
	Grade 6		Grade 8		Grade 10		Grade 12	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Total Students	6082	100.0	7185	100.0	6646	100.0	6028	100.0
Living Context								
Farm	776	12.9	957	13.4	936	14.1	927	13.9
Country	724	12.0	789	11.1	742	11.2	718	11.5
City	4464	74.0	5311	74.4	4873	73.6	4310	73.5
Reservation	65	1.1	79	1.1	74	1.2	56	1.1
Gender								
Male	3012	56.7	3589	56.4	3299	54.6	3039	55.1
Female	2297	43.3	2770	43.6	2741	45.4	2474	44.9
Ethnicity								
White	4895	80.5	6069	84.5	5843	87.9	5526	91.7
Native American	373	6.1	337	4.7	203	3.1	174	2.9
Alaskan Native	16	0.3	26	0.4	22	0.3	51	0.8
African American	68	1.6	137	1.9	120	1.8	115	1.9
Asian	61	1.0	92	1.3	73	1.1	112	1.9
Other	635	10.4	594	8.3	460	6.9	283	4.7
Pacific Islander	25	0.4	32	0.4	28	0.4	46	0.8

* The ethnicity categories may add up to more than 100% because students were allowed to select more than one race/ethnic category.

Section 2: Risk and Protective Factors for Substance Use and Other Problem Behaviors

The History and Importance of Risk and Protective Factors

The Nebraska Risk and Protective Factor Survey (NRPFS) is based upon the Risk and Protective Factor Model of Substance Abuse Prevention. Through medical research, risk factors have been found for heart disease and other health problems. Through media campaigns to inform the general public about the risk factors for heart disease, most people are now aware that eating high fat diets, smoking, having high cholesterol, being overweight, and not exercising place them at risk for heart disease. Just as medical research discovered the risk factors for heart disease, social scientists have defined a set of risk factors that place young people at risk for the problem behaviors of substance abuse, delinquency, violence, teen pregnancy, and school dropout. They have also identified a set of protective factors that help to buffer the harmful effects of risk.

Dr. J. David Hawkins, Dr. Richard F. Catalano, and their colleagues at the University of Washington have reviewed more than 30 years of existing research on substance abuse and anti-social behavior from various fields and have completed extensive work of their own to identify risk factors for youth problem behaviors. They identified risk factors in four important areas of daily life: 1) the **community**, 2) the **family**, 3) the **school**, and 4) within **individuals** themselves and their **peer** interactions. Many of the problem behaviors faced by youth — delinquency, substance abuse, violence, school dropout, and teen pregnancy — share many common risk factors. Initiatives designed to reduce those common risk factors will have the benefit of reducing several problem behaviors at once.

Using the risk and protective factor model, Drs. Hawkins and Catalano and their colleagues developed an approach that communities can use to reduce youth problem behavior. An overview of the risk factors and protective factors that have been shown to be related to youth problem behavior and their link to the NRPFS are provided in Appendix B on pages 69-72.

The remainder of this section of the report is organized according to the four domains. The definition of each risk factor is presented for each domain, and then risk and protective results for Nebraska are provided by grade. Risk and protective factor charts are also provided to illustrate Nebraska risk and protection in relation to other states. The following page provides more information on how risk and protective factor scores were developed, and how to read the charts.

The Nebraska survey is adapted from a scientifically validated survey and contains information on the risk and protective factors that are 1) locally actionable, 2) cannot be obtained through any other source, and 3) are more highly correlated with substance use. Because of these modifications, not all risk and protective factors from the original survey are included in the Nebraska version. The results contain a subset of the risk and protective factors that were specifically selected to meet data collection and planning needs of Nebraska communities. In the discussion of the results, however, all of the risk and protective factors from the risk and protective model of prevention are discussed to provide the reader with a complete overview of the model. Those planning prevention initiatives are encouraged to collect and analyze archival and social indicator data as well as these survey results, prior to developing a substance abuse prevention plan.



Just as medical research discovered the risk factors for heart disease, social scientists have defined risk factors that place youth at risk for problem behaviors.

How to Read the Risk and Protective Factor Charts in This Section

In the following sections, profile charts are used to present risk and protective factor results in the four domains. There are two components of the risk and protective factor charts that are key to understanding the information that the charts contain: 1) the **cut-points** for the risk and protective factor scales, and 2) the **dashed lines** that indicate a more “national” value.

Cut-Points

Before the percentage of youth at risk on a given scale could be calculated, a scale value or cut-point needed to be determined that would separate the at-risk group from the not-at-risk group. The revised NRPFSS instrument was designed to assess adolescent substance use, anti-social behavior and the risk and protective factors that predict these adolescent problem behaviors. Since surveys have been given to over 200,000 youth nationwide, it was possible to select two groups of youth, one that was more at risk for problem behaviors and another group that was less at risk. A cut-point score was then determined for each risk and protective factor scale that best divided the youth from the two groups into their appropriate group: more at-risk or less at-risk. The criteria for selecting the more at-risk and the less at-risk groups included academic grades (the more at-risk group received “D” and “F” grades, the less at-risk group received “A” and “B” grades), ATOD use (the more at-risk group had more regular use, the less at-risk group had no drug use and use of alcohol or tobacco on only a few occasions), and antisocial

behavior (the more at-risk group had two or more serious delinquent acts in the past year, the less at-risk group had no serious delinquent acts).

The cut-points that were determined by analyzing the results of the more at-risk and less at-risk groups will remain constant and will be used to produce the profiles for future surveys. Since the cut-points for each scale will remain fixed, the percentage of youth above the cut-point on a scale (at-risk) will provide a method for evaluating the progress of prevention initiatives over time. For example, if the percentage of youth at risk for family conflict in a community prior to implementing a community-wide family/parenting program was 60% and then decreased to 50% one year after the program was implemented, the program could be viewed as helping to reduce family conflict.

Dashed Line

Levels of risk and protection in your community also can be compared to a national sample. The dashed line on each risk and protective factor chart represents the percentage of youth at risk or with protection for the seven state sample upon which the cut-points were developed. The seven states included in the norm group were Colorado, Illinois, Kansas, Maine, Oregon, Utah, and Washington. All the states have a mix of urban and rural students.

When looking at the Community Domain, it is important to consider more than just how members of a community interact with the youth of the community. Youth benefit from living in an area where neighbors and community members show concern for them, offer them support, and give encouragement and praise. However, youth also benefit from living in a community that functions in a socially healthy manner. What is the community like? Are drugs and guns readily available? Is there an active presence of law enforcement officers in the community? Is the community lacking in economic resources? Do community members, businesses, or police turn a blind eye toward drug use and antisocial behaviors, or condone such behaviors? Is there a sense of community disorganization or do members of the community work together toward common goals?

All of these community issues, and more, play significant roles in shaping the behaviors of the youth that live within a particular community. By understanding how youth perceive their neighborhood, Nebraska communities can get a better sense of how they might change in order to reduce the risk that youth will participate in problem behaviors.

Definitions of all Community Domain risk factors, as well as scale scores for the Community Domain factors measured by the NRPFS are provided on the next pages. The table below shows the links between the community risk factors and the five problem behaviors. The check marks have been placed in the chart to

indicate where at least two well-designed, published research studies have shown a link between the risk factor and the problem behavior. Factors shaded in light gray were not selected for assessment in this survey, but are presented and defined to present a complete picture of the risk and protective factor model.

Availability of Drugs (Linked to Substance Abuse and Violence)

The more available drugs are in a community, the higher the risk that young people will abuse drugs in that community. Perceived availability of drugs is also associated with risk. For example, in schools where students just *think* drugs are more available, a higher rate of drug use occurs.

Availability of Firearms (Linked to Delinquency and Violence)

Firearm availability and firearm homicide have increased together since the late 1950s. If a gun is present in the home, it is much more likely to be used against a relative or friend than an intruder or stranger. Also, when a firearm is used in a crime or assault instead of another weapon or no weapon, the outcome is much more likely to be fatal. While a few studies report no association between firearm availability and violence, many more studies show a positive relationship. Given the lethality of firearms, the increase in the likelihood of conflict escalating into homicide when guns are present, and the strong association between availability of guns and homicide rates, firearm availability is identified as a risk factor.

Community Laws and Norms Favorable Toward Drug Use, Firearms, and Crime (Linked to Substance Abuse, Delinquency, and Violence)

Community norms-the attitudes and policies a community holds about drug use and crime-are communicated in a variety of ways: through laws and written policies, through informal social practices, and through the expectations parents

Table 4.

YOUTH AT RISK	PROBLEM BEHAVIORS				
	Substance Abuse	Delinquency	Teen Pregnancy	School Drop-Out	Violence
Community					
Availability of Drugs and Firearms	√				√
Community Laws and Norms Favorable Toward Drug Use	√				
Transitions and Mobility	√	√		√	
Low Neighborhood Attachment and Community Disorganization	√	√			√
Extreme Economic and Social Deprivation	√	√	√	√	√

and other community members have of young people. When laws and community standards are favorable toward drug use or crime, or even if they are just *unclear*, youth are at higher risk.

Transitions and Mobility (Linked to Substance Abuse, Delinquency, and School Dropout)

Even normal school transitions predict increases in problem behaviors. When children move from elementary school to middle school or from middle school to high school, significant increases in the rates of drug use, school misbehavior, and delinquency result.

Communities with high rates of mobility appear to be linked to an increased risk of drug use and crime problems. The more often people in a community move, the greater the risk of both criminal behavior and drug-related problems in families. While some people find buffers against the negative effects of mobility by making connections in new communities, others have fewer resources to deal with the effects of frequent moves and are more likely to have problems.

Low Neighborhood Attachment and Community Disorganization (Linked to Substance Abuse, Delinquency, and Violence)

Higher rates of drug problems, juvenile delinquency and violence occur in communities or neighborhoods where people have little attachment to the community, where the rates of vandalism are high, and where there is low surveillance of public places. These conditions are not limited to low-income neighborhoods, they can also be found in wealthier neighborhoods. The less homogeneous a community (in terms of race, class, religion, and even the mix of industrial to residential neighborhoods) the less connected its residents may feel to the overall community, and the more difficult it may be to establish clear community goals and identity. The challenge of creating neighborhood attachment and organization can be greater in these neighborhoods.

Perhaps the most significant issue affecting community attachment is whether

residents feel they can make a difference in their own lives. If the key players in the neighborhood (e.g. merchants, teachers, police, and human services personnel) live outside the neighborhood, residents' sense of commitment will likely be less. Lower rates of voter participation and parental involvement in schools also indicate lower attachment to the community.

Extreme Economic Deprivation (Linked to Substance Abuse, Delinquency, Teen Pregnancy, School Dropout, and Violence)

Children who live in deteriorating and crime-ridden neighborhoods characterized by extreme poverty are more likely to develop problems with delinquency, violence, teen pregnancy, and school dropout. Children who live in these areas *and* have behavior and adjustment problems early in life are also more likely to have problems with drugs later on.

Risk Factors

Across grades and risk factors, the majority of Nebraska survey participants were not at-risk in the Community Domains that were assessed. Table 5 shows that the greatest risk factors in this domain was for Perceived Availability of Drugs among 12th graders (43.3% at risk), followed by Community Disorganization for 10th graders (41.8% at risk). Table 5 also suggests that, for the Community Domain as a whole, the number of students at risk in Nebraska increases only slightly across grades. When compared to national cut-off scores by grade, there is an occasional decline in the number of students at risk. For example, the number of students at risk for Laws and Norms Favorable Toward Drug Use is highest in 6th grade, and lowest in grades 8 and 12.

One important finding that can be extracted from Table 5 is the importance of focusing efforts on problems with Community Disorganization. For all grades, Community Disorganization is either the largest or second largest factor with at risk students. The severity of risk in other factors varies by grade. Laws and Norms Favoring Drug Use is the primary cause of concern among 6th graders, while perceived availability of handguns is the primary cause of risk among 8th graders. Among 10th and 12 graders, the availability of drugs becomes a prominent concern.

Looking at Nebraska's community risk factor scales in relation to the seven-state norm, Figure 3 illustrates that Nebraska's levels of risk are lower than other states for all grades and all factors assessed. Although increasing grade is not strongly related to risk in the Community Domain as a whole, one can see that risk from Perceived Availability of Drugs does increase with increasing grade level.

Protective Factors

For the Nebraska survey, the Opportunities for Prosocial Involvement Scale was selected for assessment (see Table 5). Results show that protection among Nebraska students was well above the seven-state norm.

When looking at the results by grade, one can see that protection declines slightly from grades 6 and 8 to grades 10 and 12 (see Figure 4). While the lowest protection levels are found in grade 10 (74.1% protected), grade 12 is nearly

identical (74.4% protected). Despite the drop in protection from grades 6 and 8 to grades 10 and 12, it is important to keep in mind the previously-discussed high levels of protection relative to the seven-state norm.

Table 5.

Community Domain	Grade 6	Grade 8	Grade 10	Grade 12
Percent of Students At Risk in the Following Risk Factor Scales				
Community Disorganization	33.5	31.2	41.8	39.5
Laws & Norms Favor Drug Use	34.1	26.2	32.3	29.0
Perceived Availability of Drugs	24.6	26.6	38.5	43.3
Perceived Availability of Handguns	24.4	36.3	24.1	28.2
Percent of Students With Protection in the Following Protective Factor Scales				
Opportunities for Prosocial Involvement	78.3	79.8	74.1	74.4

Figure 3

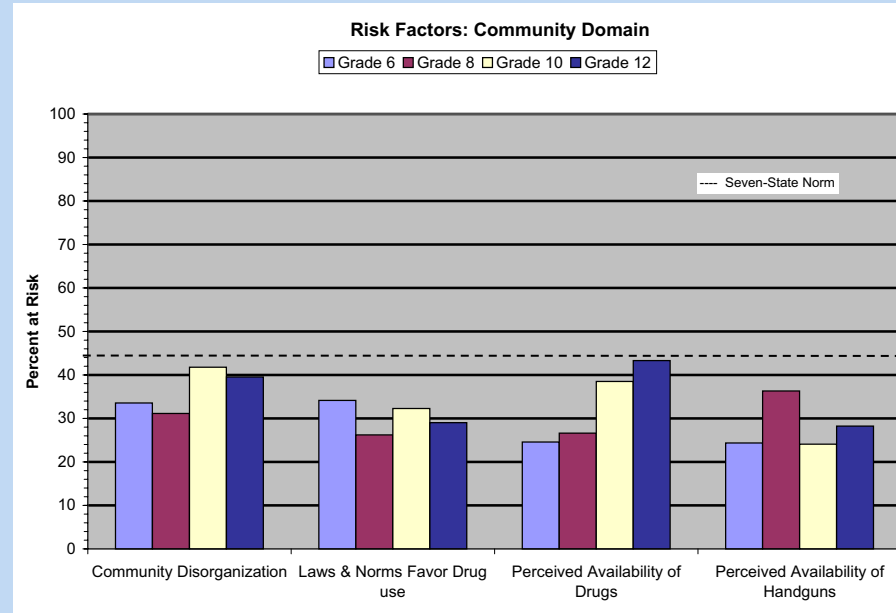
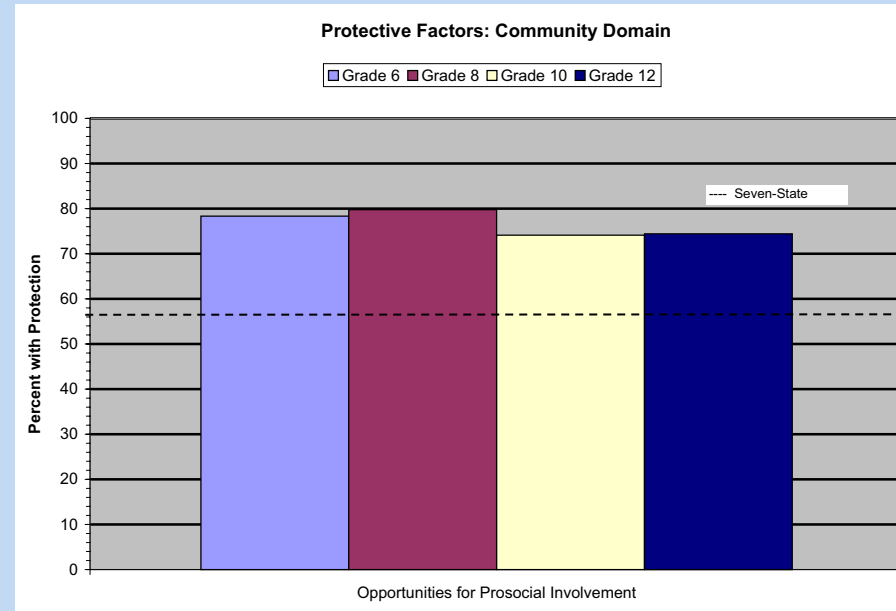


Figure 4



Family Risk and Protective Factors

Within the Family Domain, it is important to consider more than parents' personal interaction with their children. Youth benefit from being bonded to their extended family, and from belonging to a family which offers support, encouragement, and praise. Important factors that can contribute to youth problem behaviors include whether or not the youth's parents or siblings have used substances, approve of the use of substances, or have participated in antisocial behaviors. If a youth's living situation is full of conflict (fights and arguments) and disorganization (lack of family communication or parents' not knowing the whereabouts or doings of their children), the youth is also at risk for problem behaviors.

Definitions of all Family Domain risk factors, as well as scores for the Family Domain, are provided on the following pages. The table below shows the links between the family risk factors and the five problem behaviors. The check marks have been placed in the chart to indicate where at least two well-designed, published research studies have shown a link between the risk factor and the problem behavior. Factors shaded in light gray were not selected for assessment in this survey, but are presented and defined to present a complete picture of the risk and protective factor model.

Family History of the Problem Behavior (Linked to Substance Abuse, Delinquency, Teen Pregnancy, School Dropout, and Violence)

If children are raised in a family with a history of addiction to alcohol or other drugs, the risk of their having alcohol and other drug problems themselves increases. If children are born or raised in a family with a history of criminal activity, their risk of juvenile delinquency increases. Similarly, children who are raised by a teenage mother are more likely to become teen parents, and children of dropouts are more likely to drop out of school themselves.

Family Management Problems (Linked to Substance Abuse, Delinquency, Teen Pregnancy, School Dropout, and Violence)

Poor family management practices include lack of clear expectations for behavior, failure of parents to monitor their children (knowing where they are and who they are with), and excessively severe or inconsistent punishment.

Family Conflict (Linked to Substance Abuse, Delinquency, Teen Pregnancy, School Dropout, and Violence)

Persistent, serious conflict between primary care givers or between care givers and children appears to enhance risk for children raised in these families. Conflict between family members appears to be a more important risk factor than family structure. Whether the family is headed by two biological parents, a single parent, or some other primary care giver, children raised in families high in conflict appear to be at risk for all of the problem behaviors.

Table 6.

YOUTH AT RISK	PROBLEM BEHAVIORS				
	Substance Abuse	Delinquency	Teen Pregnancy	School Drop-Out	Violence
Family					
Family History of the Problem Behavior	√	√	√	√	
Family Management Problems	√	√	√	√	√
Family Conflict	√	√	√	√	√
Favorable Parental Attitudes and Involvement In the Problem Behavior	√	√			√

Favorable Parental Attitudes and Involvement In the Behavior (Linked to Substance Abuse, Delinquency, and Violence)

Parental attitudes and behavior toward drugs, crime, and violence influence the attitudes and behavior of their children. Parental approval of young people's moderate drinking, even under parental supervision, increases the risk of the young person using marijuana. Similarly, youth whose parents excuse them for breaking the law are more likely to develop problems with juvenile delinquency. In families where parents display violent behavior toward those outside or inside the family, there is an increase in the risk that a child will also become violent. Further, in families where parents involve children in their own drug or alcohol behavior-for example, asking the child to light the parent's cigarette or to get the parent a beer-there is an increased likelihood that their children will become drug abusers in adolescence.

Risk Factors

Across grades, a majority of Nebraska survey respondents were not at-risk in the Family Domain. Table 7 shows that the greatest number of students at risk were in the Parental Attitudes Favoring Drug Use factor among 10th graders (43.8% at risk) and 12th graders (46.6% at risk). Sixth and 8th graders were considerably less at risk relative to their older counterparts. Figure 5 displays a linear relationship between risk due to Parental Attitudes Favoring Drug Use and grade level; as grade increases, so does risk. Risk due to Poor Family Management was greatest among 10th graders, followed by 6th graders; however, as can be seen in Figure 5, risk for this factor was generally quite similar across grades.

Relative to the seven-state norm, Figure 5 illustrates that Nebraska's levels of risk were lower than the seven-state norm in most cases. However, in 10th and 12th grade, more students from Nebraska were at risk due to Parental Attitudes Favoring Drug Use than were in the seven-state norm. The fact that risk becomes greater with increasing grade suggests that intervention to reduce parental attitudes favoring drug use should take place before students reach the grades in which risk escalates (i.e., before grade 10).

Protective Factors

For the Nebraska survey, the Family Attachment and Opportunities for Prosocial Involvement Scales were selected for assessment (see Table 7). Nebraska students reported their greatest protection in the Family Attachment factor. Protection in this factor remained relatively stable across grades, and is exceptional relative to the national average, ranging from 13.2 above the national average (Grade 10) to 17.6 above the national average (Grade 8).

Protection due to Opportunities for Prosocial Involvement was also quite high in Nebraska. However, as can be seen in Figure 6, this protection shows a significant decline from grades 6 and 8 relative to grades 10 and 12. The fact that protection declines with increasing grade suggests that intervention to increase family opportunities for prosocial involvement should take place before students reach the grades in which protection declines (i.e., before grade 10).

Table 7.

Family Domain	Grade 6	Grade 8	Grade 10	Grade 12
Percent of Students At Risk in the Following Risk Factor Scales				
Poor Family Management	30.5	28.2	32.5	27.6
Parent Attitudes Favor Drug Use	14.3	26.1	43.8	46.6
Percent of Students With Protection in the Following Protective Factor Scales				
Family Attachment	72.0	73.6	69.2	71.1
Family Opportunities for Prosocial Involvement	68.7	69.3	59.3	59.3

Figure 5

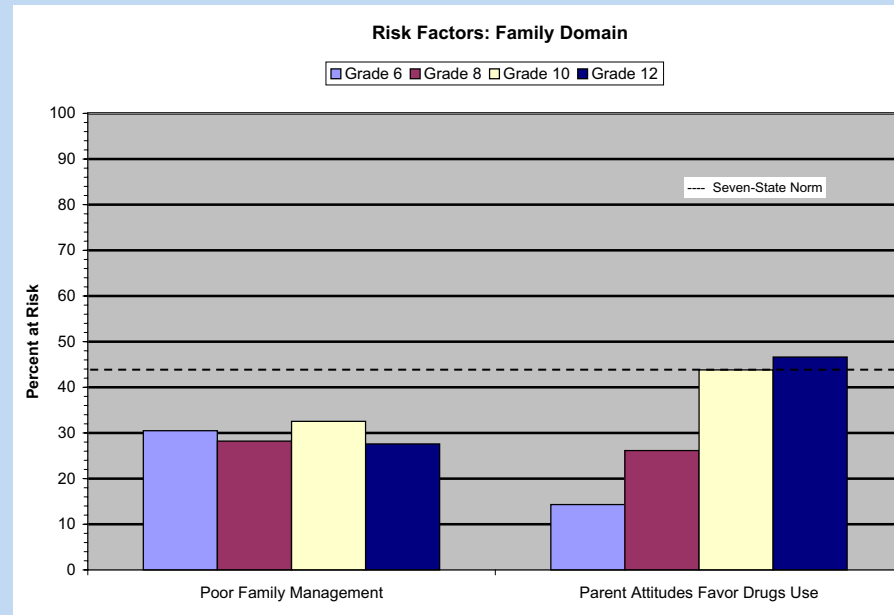
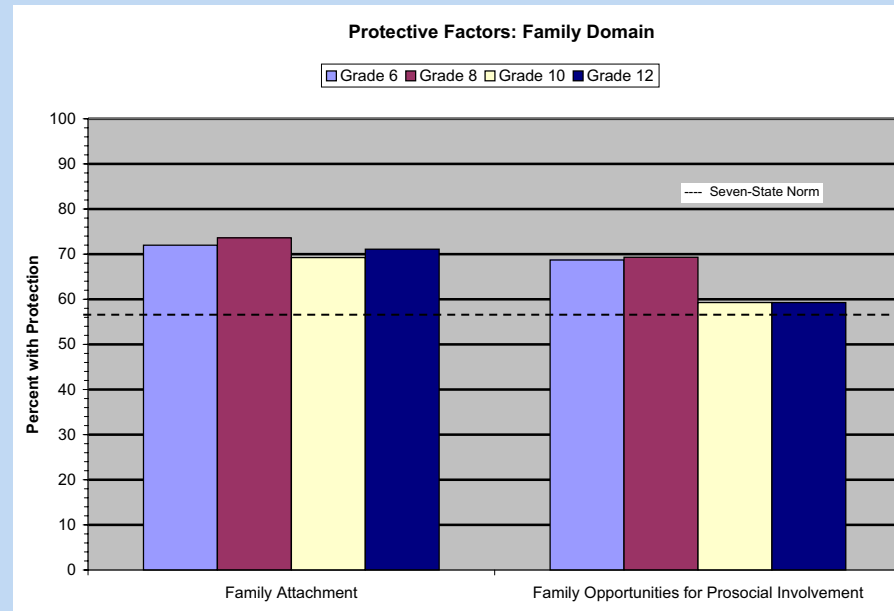


Figure 6



School Risk and Protective Factors

In the School Domain, the early years are important in increasing or decreasing the level of risk for children. Academic failure in elementary school puts children at risk for substance use, delinquency, teen pregnancy, school drop out, and violence later in life. Further, a child with early and persistent antisocial behavior is at risk for substance use and other problems later in life.

These two factors (academic failure and early engagement in antisocial behavior) indicate that prevention initiatives should begin early in a student's schooling. Programs that can effectively target the needs of the school population will help to decrease the level of risk, thereby decreasing problem behaviors later in schooling. The Nebraska data will be important for schools, in that it will help them target the problem behaviors and student populations which are at the greatest need for services.

As with the Community and Family Domains, bonding at the school level also decreases risk and increases protection. When students have healthy relationships with their teachers, when they feel as if they are able to play an active role in their classes and in their school, and when they receive encouragement and support, they are more bonded to their school and their commitment to school is less likely to falter.

Definitions of all School Domain risk factors, as well as scores for the School Domain are provided on the next pages. The table below shows the links between the school risk factors and the five problem behaviors. The check marks have been placed in the chart to indicate where at least two well designed, published research studies have shown a link between the risk factor and the problem behavior. Factors shaded in light gray were not selected for assessment in this

Table 8.

YOUTH AT RISK	PROBLEM BEHAVIORS				
	Substance Abuse	Delinquency	Teen Pregnancy	School Drop-Out	Violence
School					
Early and Persistent Antisocial Behavior	√	√	√	√	√
Academic Failure in Elementary School	√	√	√	√	√
Lack of Commitment to School	√	√	√	√	

survey, but are presented and defined to present a complete picture of the risk and protective factor model. Early initiation of antisocial behavior was measured in the Peer/Individual Domain section of the NRPFS survey.

Early and Persistent Antisocial Behavior (Linked to Substance Abuse, Delinquency, Teen Pregnancy, School Dropout, and Violence)

Research shows that boys who are aggressive in grades K-3 are at higher risk for substance abuse and delinquency. When a boy's aggressive behavior in the early grades is combined with isolation or withdrawal, there is an even greater risk of problems in adolescence. This increased risk also applies to aggressive behavior combined with hyperactivity or attention deficit disorder.

This risk factor also includes persistent antisocial behavior in early adolescence, like misbehaving in school, skipping school, and getting into fights with other children. Young people, both girls and boys, who engage in these behaviors during early adolescence are at increased risk for drug abuse, delinquency, teen pregnancy, school dropout, and violence.

Academic Failure in Elementary School (Linked to Substance Abuse, Delinquency, Teen Pregnancy, School Dropout, and Violence)

Beginning in the late elementary grades, academic failure increases the risk of drug abuse, delinquency, violence, teen pregnancy, and school dropout. Students fail for many reasons. It appears that *the experience of failure*, not necessarily the student's ability, increases the risk of problem behaviors.

Lack of Commitment to School (Linked to Substance Abuse, Delinquency, Teen Pregnancy, School Dropout, and Violence)

Lack of commitment to school means the young person has ceased to see the role of student as a viable one. Young people who have lost this commitment to school are at higher risk for all five problem behaviors.

Risk Factors

For the Nebraska survey, one risk factor scale was assessed within the School Domain -- Low Commitment to School. The percentage of Nebraska students at risk can be seen in Table 9. The percentage of students at risk is fairly consistent across grades, but peaks slightly in 10th grade before declining again in 12th.

As seen in Figure 7, Nebraska students were slightly above (slightly more at risk relative to) the seven-state norm across all grades. The amount of risk above the seven-state norm varied from .5% above for 6th graders to 11.3% above for 12th graders. It should be noted that Low Commitment to School, while in the School Domain, can be impacted by a number of conditions outside of the School Domain. Family attitudes, economic deprivation, lack of future occupational opportunities, school consolidation, student mobility, and lack of resources to pursue post-secondary educational opportunities are just a few of these conditions.

Protective Factors

For the Nebraska survey, the Opportunities for Prosocial Involvement Scale was selected for assessment (see Table 9). The number of protected students in the Opportunities for Prosocial Involvement factor of this domain was higher than the seven state norm across all grades. Protection in this factor was exceptional relative to the national average, and ranged from 15.9% above the national average (Grade 6) to 25.7 above the national average (Grade 8). In general, results suggest a high degree of protection for this factor of the School Domain.

Table 9.				
School Domain	Grade 6	Grade 8	Grade 10	Grade 12
Percent of Students At Risk in the Following Risk Factor Scales				
Low Commitment to School	44.5	47.2	55.3	47.5
Percent of Students With Protection in the Following Protective Factor Scales				
Opportunities for Prosocial Involvement	71.9	81.7	75.8	75.6

School Risk and Protective Factors

Figure 7

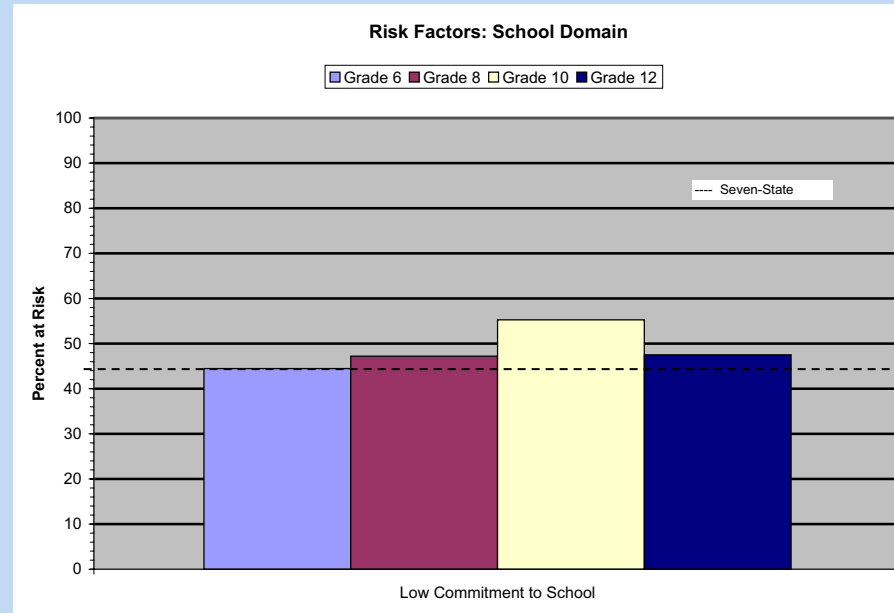
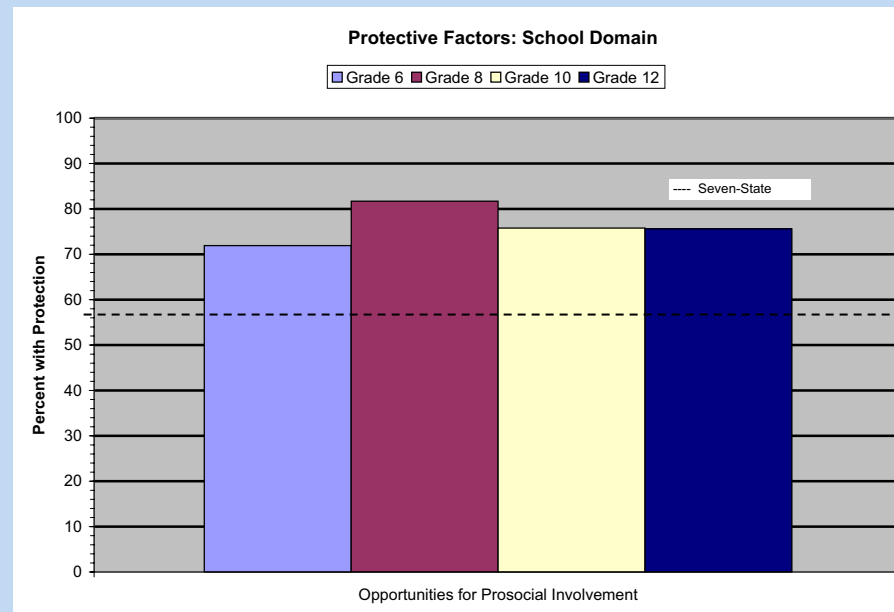


Figure 8



Peer/Individual Risk and Protective Factors

The final domain of a student's life -- Peer/Individual -- consists of much more than mere peer pressure. While students are at risk for problem behaviors when they have friends who are engaging in unfavorable behaviors, or their friends have favorable attitudes toward the behaviors (i.e. it is seen as "cool"), the Peer/Individual Domain also consists of several factors which spring from the individual. For example, students who are depressed, rebellious, or who feel alienation are more likely to use drugs and engage in antisocial behavior. Other constitutional factors also play a part in whether or not a student is at risk for ATOD use or antisocial behaviors.

Definitions of all Peer/Individual Domain risk and protective factors-as well as a description of individual characteristics, bonding, healthy beliefs and clear standards-are presented in this section. Scores for the scales in this domain are also provided in this section in the form of tables and charts. The table below shows the links between the Peer/Individual risk factors and the five problem behaviors. The check marks have been placed in the chart to indicate where at least two well-designed, published research studies have shown a link between the risk factor and the problem behavior. Factors shaded in light gray were not selected for assessment in this survey, but are presented and defined to present a complete picture of the risk and protective factor model.

Table 10.

YOUTH AT RISK	PROBLEM BEHAVIORS				
	Substance Abuse	Delinquency	Teen Pregnancy	School Drop-Out	Violence
Peer/Individual					
Alienation and Rebelliousness	√	√		√	
Friends Who Engage in a Problem Behavior	√	√	√	√	√
Favorable Attitudes Toward the Problem Behavior	√	√	√	√	
Early Initiation of the Problem Behavior	√	√	√	√	√
Depressive Symptoms	√	√			
Intention to Use ATODs	√				

Alienation, Rebelliousness, and Lack of Bonding to Society (Linked to Substance Abuse, Delinquency, and School Dropout)

Young people who feel they are not part of society, are not bound by rules, don't believe in trying to be successful or responsible, or who take an active rebellious stance toward society are at higher risk of drug abuse, delinquency, and school dropout.

Friends Who Engage in the Problem Behavior (Linked to Substance Abuse, Delinquency, Teen Pregnancy, School Dropout, and Violence)

Youth who associate with peers who engage in problem behaviors are much more likely to engage in the same problem behaviors. This is one of the most consistent predictors of youth problem behaviors that the research has identified. Even when young people come from families with good management skills and do not experience other risk factors, just hanging out with those who engage in problem behaviors greatly increases their risks. However, young people who experience a low number of risk factors are also less likely to associate with those who are involved in problem behaviors.

Favorable Attitudes Toward the Problem Behavior (Linked to Substance Abuse, Delinquency, Teen Pregnancy, and School Dropout)

During the elementary school years, children usually express anti-drug, anti-crime, pro-social attitudes. They have difficulty imagining why people use drugs, commit crimes, and drop out of school. In middle school, as others they know participate in such activities, their attitudes often shift toward greater acceptance of these behaviors. This places them at higher risk.

Early Initiation of the Problem Behavior (Linked to Substance Abuse, Delinquency, Teen Pregnancy, School Dropout, and Violence)

The earlier young people begin using drugs, committing crimes, engaging in violent activity, becoming sexually active, and dropping out of school, the greater the likelihood that they will have problems with these behaviors later on. For example, research shows that young people who initiate drug use before age fifteen are at twice the risk of having drug problems as those who wait until after age nineteen.

Depressive Symptoms (Linked to Substance Abuse and Delinquency)

Young people who are depressed are overrepresented in the criminal justice system and are more likely to use drugs. Survey research and other studies have shown a link between depression and other youth problem behaviors. Because they are depressed, these individuals have difficulty in identifying and engaging in pro-social activities. They consequently do not gain recognition for demonstrating positive behaviors or develop attachments to their schools or communities.

Intention to Use ATODs (Linked to Substance Abuse)

Many prevention initiatives focus on reducing the intention of participants to use ATODs later in life. Reduction of intention to use ATODs often follows successful prevention interventions.

Gang Involvement (Linked to Substance Abuse, Delinquency, School Dropout, and Violence)

Youth who belong to gangs are more at risk for antisocial behavior and drug use. The risk factors associated with gang involvement are well known, and gang membership has been linked to violence, shootings, destruction of public property,

and involvement in other illegal behaviors including distribution of drugs.

Constitutional Factors (Linked to Substance Abuse, Delinquency, and Violence)

Constitutional factors are factors that may have a biological or physiological basis. These factors are often seen in young people with behaviors such as sensation-seeking, low harm-avoidance, and lack of impulse control. These factors appear to increase the risk of young people abusing drugs, engaging in delinquent behavior, and/or committing violent acts.

Some young people who are exposed to multiple risk factors do not become substance abusers, juvenile delinquents, teen parents, or school dropouts. Balancing the risk factors are protective factors, those aspects of people's lives that counter risk factors or provide buffers against them. They protect by either reducing the impact of the risks or by changing the way a person responds to the risks. A key strategy to counter risk factors is to enhance protective factors that promote positive behavior, health, well-being, and personal success. Research indicates that protective factors fall into three basic categories: Individual Characteristics, Bonding, and Healthy Beliefs and Clear Standards.

Individual Characteristics

Research has identified four individual characteristics as protective factors. These attributes are considered to be inherent in the youth and are difficult, if not impossible, to change. They consist of: a resilient temperament, a positive social orientation and intelligence. Note: students with higher intelligence are less likely to become delinquent or drop out of school, but intelligence is not a protective factor for substance abuse.

Bonding

Research indicates that one of the most effective ways to reduce children's risk is to strengthen their bond with positive, pro-social family members, teachers, or other significant adults, and/or pro-social friends. Children who are *attached* to positive families, friends, schools, and their community, and who are *committed* to achieving the goals valued by these groups, are less likely to develop problems in adolescence. Children who are bonded to others who hold healthy beliefs are less likely to do things that threaten that bond, such as use drugs, commit crimes, or drop out of school. For example, if children are attached to their parents and want to please them, they will be less likely to risk breaking this connection by doing things of which their parents strongly disapprove. Studies of successful children who live in high risk neighborhoods or situations indicate that strong bonds with a care giver can keep children from getting into trouble. Positive bonding makes up for many disadvantages caused by risk factors or environmental characteristics.

Healthy Beliefs and Clear Standards

Bonding is only part of the protective equation. Research indicates that another group of protective factors falls into the category of healthy beliefs and clear standards. The people with whom children are bonded need to have *clear, positive standards for behavior*. The content of these standards is what protects young people. For example, being opposed to youth alcohol and drug use is a standard that has been shown to protect young people from the damaging effects of substance abuse risk factors. Children whose parents have high expectations for their school success and achievement are less likely to drop out of school. Clear standards against criminal activity and early, unprotected sexual activity have a similar protective effect.

The negative effects of risk factors can be reduced when schools, families, and/or peer groups teach young people healthy beliefs and set clear standards for their behavior. Examples of healthy beliefs include believing it is best for children to be drug and crime free and to do well in school. Examples of clear standards include establishing clear no drug and alcohol use family rules, establishing the expectation that a youngster does well in school, and having consistent family rules against problem behaviors.

Risk Factors

In contrast to some of the other domains and factors discussed previously, for most risk factors in the Peer/Individual Domain, the number of Nebraska students at risk frequently increased with increasing grade level (see Table 11). For example, in the Perceived Risk of Drug Use risk factor, 24.8% of 6th graders, 28.0% of 8th graders, 31.9% of 10th graders, and 38.5% of 12th graders were at risk. A similar, linear trend was found for Early Initiation of Anti-Social Behavior. It is interesting to note that, where this linear trend did not occur, 6th graders were the deviating group. Sixth graders were more at risk than 8th graders on 3 of the 6 factors. Only one factor, Gang Involvement, declined slightly over increased grade level. Even though the linear trend can be seen in Figure 9, one should not conclude that progression across grades causes an increase in risk. Because the data are cross-sectional (and not longitudinal), it can only be stated that there is a relationship between grade and increased risk, not change in grade and increased risk.

In comparison to the seven-state norm, the number of Nebraska students at risk is below the norm. The only factor that is higher than the seven state norm is Attitudes Favorable to Anti-Social Behavior among 10th graders (45.3% at risk) and 12th graders (45.2% at risk). All other scales, across all grades, are at least 4% below the national average.

Protective Factors

For the Nebraska survey, the Social Skills and Belief in a Moral Order Scales were selected for assessment (see Table 11). For both factors assessed, Nebraska was above the seven-state norm for all grades except 12th, and this exception occurred only in the case of protection due to a Belief in the Moral Order (see Figure 10). Fewer Nebraska 12th grade students indicated protection due to a Belief in Moral Order than did students in the seven-state sample. In the Nebraska sample, protection due to a Belief in the Moral Order declined slightly over increasing grade level, but is fairly stable until 12th grade, where it drops to 47.5% with protection.

Interestingly, the greatest departure from the seven-state norm was found in social skills. Sixth and 8th grade Nebraska students were respectively 24.3% and 19.6% above the national average in protection due to social skills. Although higher than the national average in all cases, Nebraska students tended to regress to the norm with increased grade level (although grade 10 was lowest).

Though not a perfect linear trend, there is a negative relationship between grade and level of protection. It appears that, in general, levels of protection decline with increases in grade level. Again, however, these data are cross-sectional and therefore they cannot be used to make a case for the argument that change in grade level leads to lower levels of protection.

Table 11.

Peer/Individual	Grade 6	Grade 8	Grade 10	Grade 12
Percent of Students At Risk in the Following Risk Factor Scales				
Early Initiation of Antisocial Behavior	15.3	22.7	25.9	27.0
Early Initiation fo Drug Use	28.9	23.1	30.9	36.8
Attitudes Favorable to Antisocial Behavior	38.4	30.0	45.3	45.2
Attitudes Favorable to Drug Use	21.8	20.0	34.2	39.1
Perceived Risk of Drug Use	24.8	28.0	31.9	38.5
Gang Involvement	8.6	8.9	8.2	6.2
Percent of Students With Protection in the Following Protective Factor Scales				
Social Skills	80.3	75.6	60.7	66.6
Belief in Moral Order	68.3	69.8	66.1	47.5

Figure 9

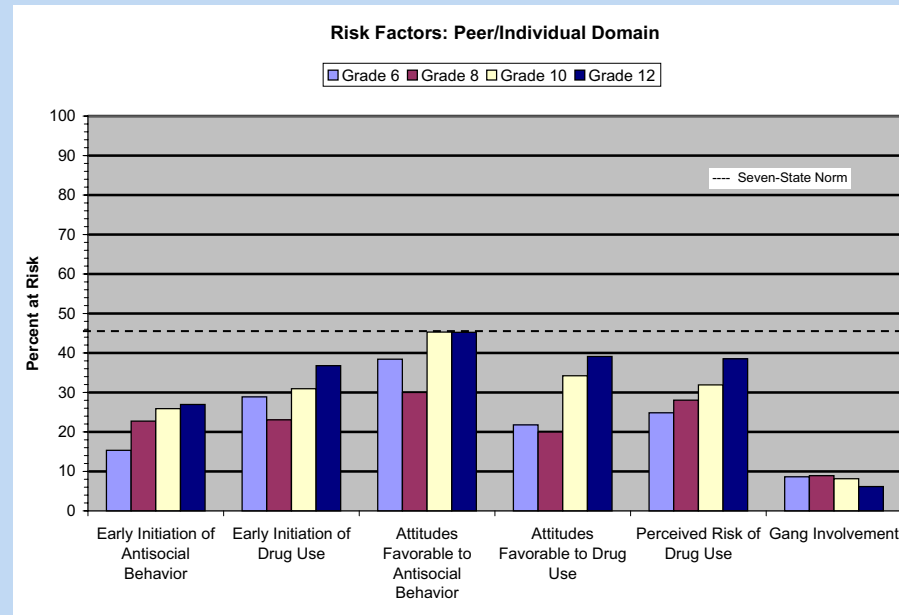
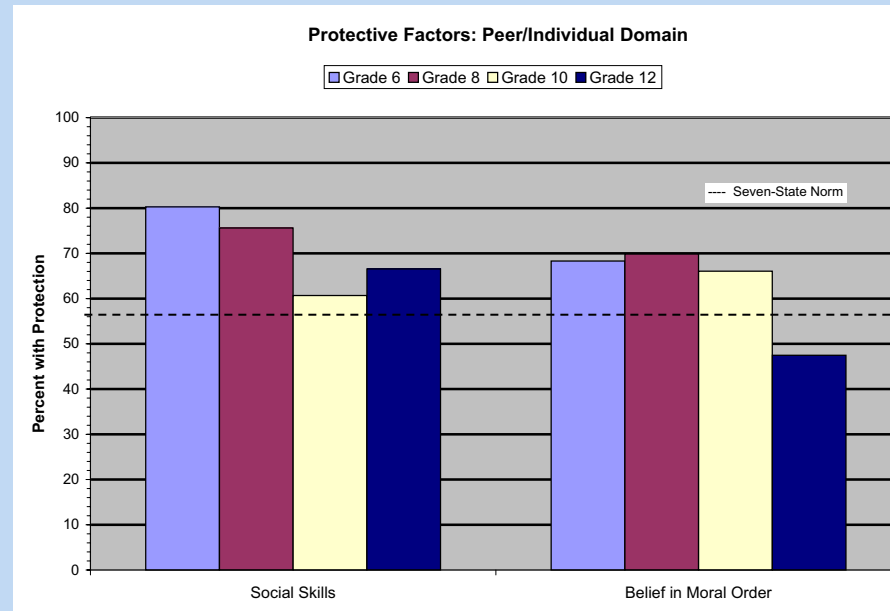


Figure 10



Section 3: Survey Results

Age of Initiation: ATOD Use

Age of Initiation: ATOD Use

Nebraska students were asked at what age, if ever, they first used ATODs. In calculating the average age of initiation, only those students who indicated they had used the substances were included in the calculations of age of first use.

The results in Table 12 and Figure 11 show that students begin using cigarettes before using any other substance. Of the students who had used cigarettes, the average age of first use was 12.5 years. First sip or more of alcohol quickly follows first cigarette use. The first sip of alcohol occurs, on average, at 12.8 years, and the first regular use of alcohol at 14.6 years. The results also show that students begin trying marijuana earlier than they begin regular drinking. Of the students who had used marijuana, the average age of first use was 13.9 years — less than a year before students indicated that they had begun drinking regularly and less than one year after their first sip of alcohol.

Appendix E provides an explanation of the factors that best predict substance use among Nebraska youth. That section is not included in the main body of this document because of its statistically complex nature. Interested readers are encouraged to review Appendix E.

Figure 11

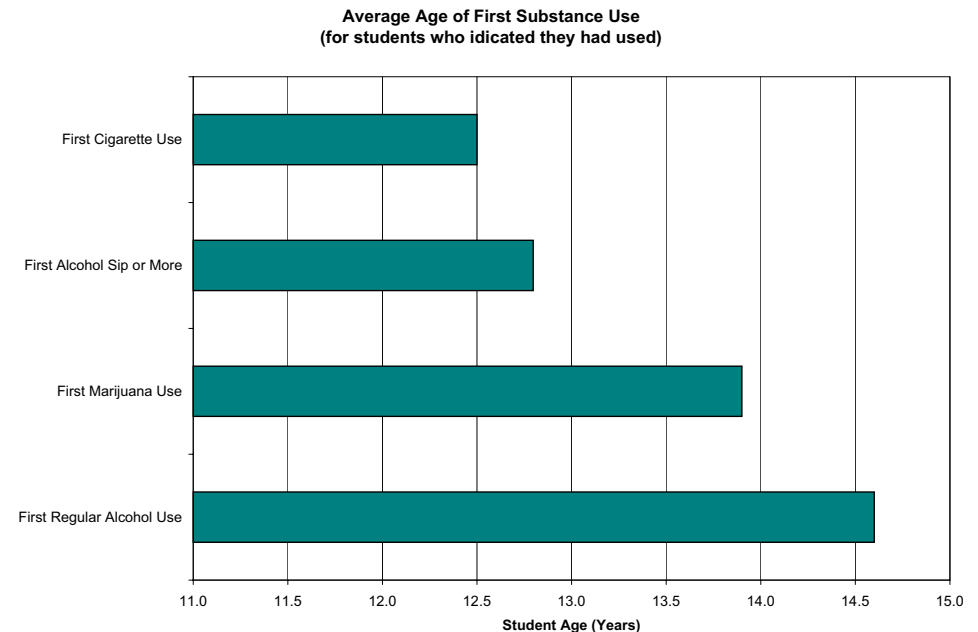


Table 12.

Age of Initiation

Drug Used	Average Age of First Use (Of Students Who Indicated That They Had Used)
First Cigarette Use	12.5
First Alcohol Sip or More	12.8
First Marijuana Use	13.9
First Regular Alcohol Use	14.6

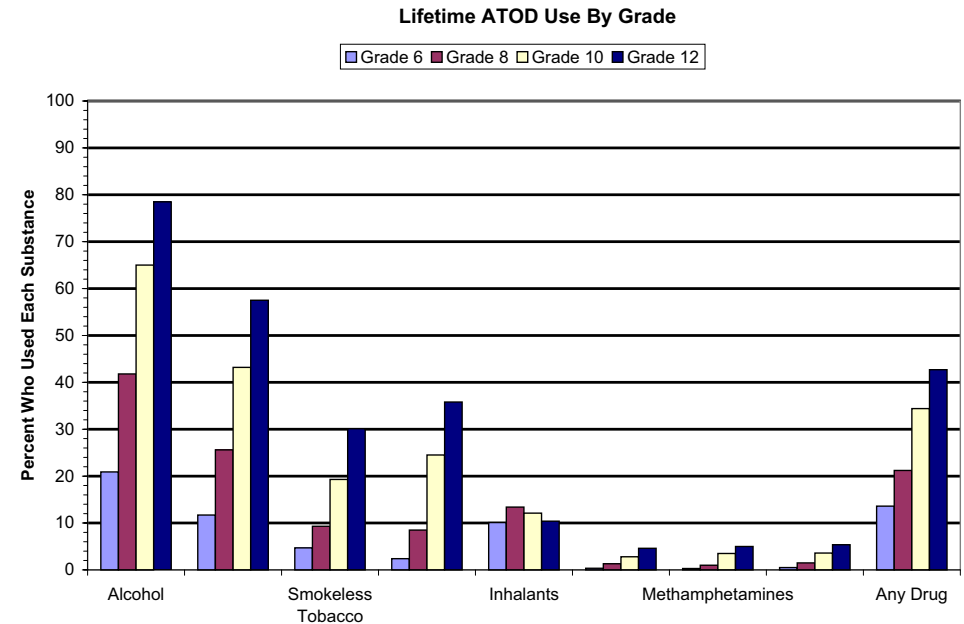
Lifetime ATOD Use, By Grade

Nebraska Lifetime Usage

Lifetime use is a good measure of youth experimentation with alcohol, tobacco, and other drugs. If a student indicates he or she has used a substance at least once in his or her lifetime, the response is included in this section. As can be seen in Table 13 and Figure 12, the most common substances used are alcohol (51.4% of Nebraska survey participants have used at least once), cigarettes (34.3% have used), marijuana (17.5% have used), smokeless tobacco (15.6% have used) and inhalants (11.6% have used). Use of hallucinogens, cocaine, and methamphetamines were all less than 3.0% (across grades).

Typically, reported rates of lifetime use or experimentation with substances increases with each increase in grade level. As Figure 12 illustrates, for Nebraska youth this holds true for every substance except inhalants. Current 6th and 8th grade students reported higher rates of lifetime use than did 10th and 12th grade students. Although subsequent years of data will be required to document an actual trend in increased inhalant use among Nebraska youth, this data provides early indication that Nebraska youth may be following a national trend of increased use of—and experimentation with—inhalants.

Figure 12



Nebraska Results Compared to National Results

Nebraska results can be compared to the National Monitoring the Future (MTF) survey results for grades 8, 10, and 12. These data are presented in Table 13 and Figures 13 through 15. Relative to national trends from MTF, Nebraska data shows that fewer Nebraska survey participants report lifetime experience with most substances than in the national sample (across grades). The only exceptions where Nebraska students used more of any substance were with 10th and 12th graders smokeless tobacco use (19.3% for Nebraska 10th graders compared to 16.9% for MTF; 30.1% for Nebraska 12th graders compared to 18.3% for MTF) and 12th grade cigarette use (57.4% for Nebraska compared to 57.2% for MTF). Use of all other substances was lower in Nebraska than in the national MTF data.

Table 13. Percentage of Nebraska Respondents Who Used ATODs During Their Lifetime by Grade

Question	Grade 6	Grade 8		Grade 10		Grade 12		Total Nebraska Sample
	Nebraska	Nebraska	MTF	Nebraska	MTF	Nebraska	MTF	
Alcohol	20.7	41.7	47.0	64.8	66.9	78.2	78.4	51.4
Cigarettes	11.7	25.6	31.4	43.1	47.4	57.4	57.2	34.3
Smokeless Tobacco	4.7	9.3	11.2	19.3	16.9	30.1	18.3	15.6
Marijuana	2.4	8.5	19.2	24.8	38.7	36.0	47.8	17.5
Inhalants	10.1	13.5	15.2	11.9	13.5	10.3	11.7	11.6
Hallucinogens	0.4	1.3	4.1	2.9	7.8	4.7	12.0	2.2
Cocaine	0.3	1.0	3.6	3.6	6.1	5.0	7.8	2.7
Methamphetamines	0.5	1.5	---	3.6	---	5.5	---	2.4
Any Drug	13.6	21.3	24.5	34.5	44.6	42.9	53.0	28.0

The symbol --- is used to indicate an area where MTF data is not available.

Figure 13

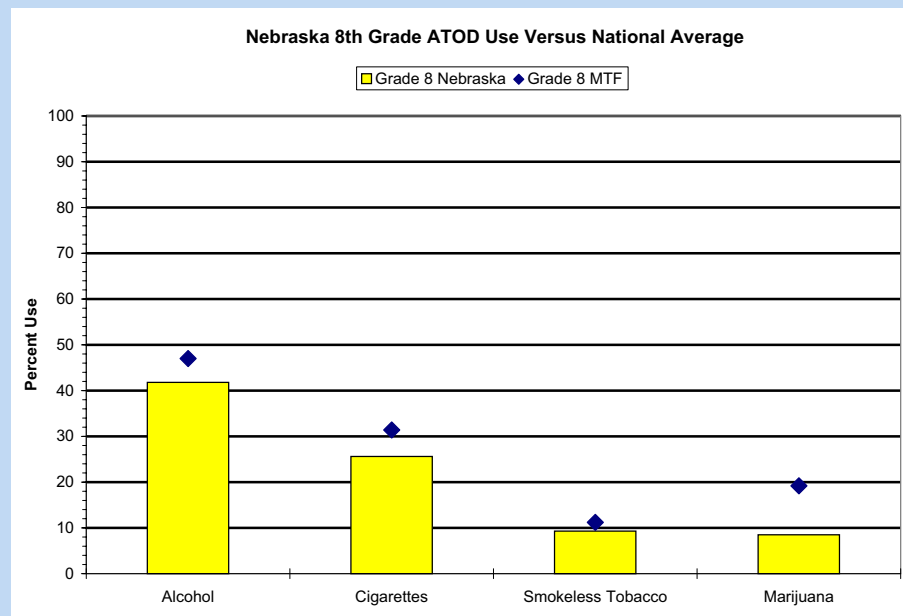


Figure 14

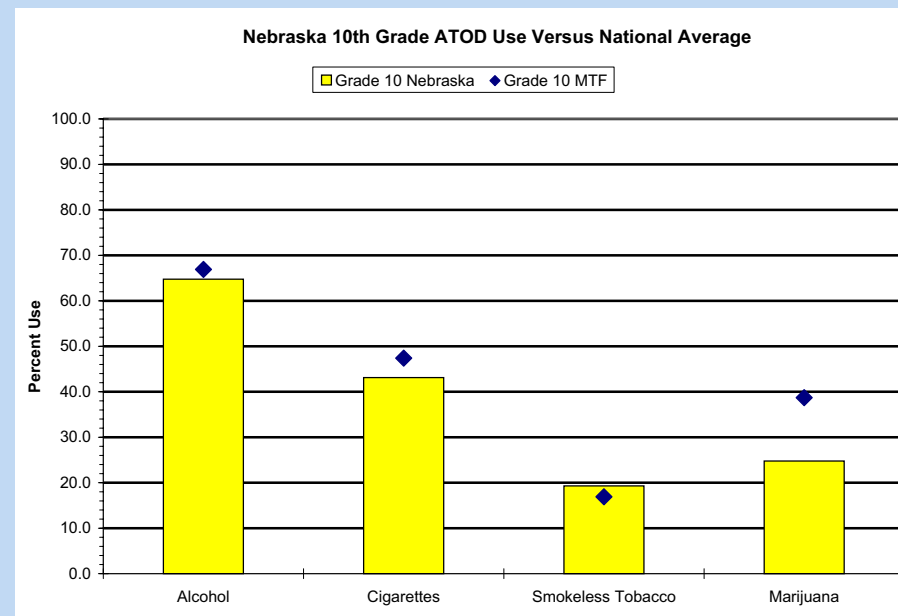
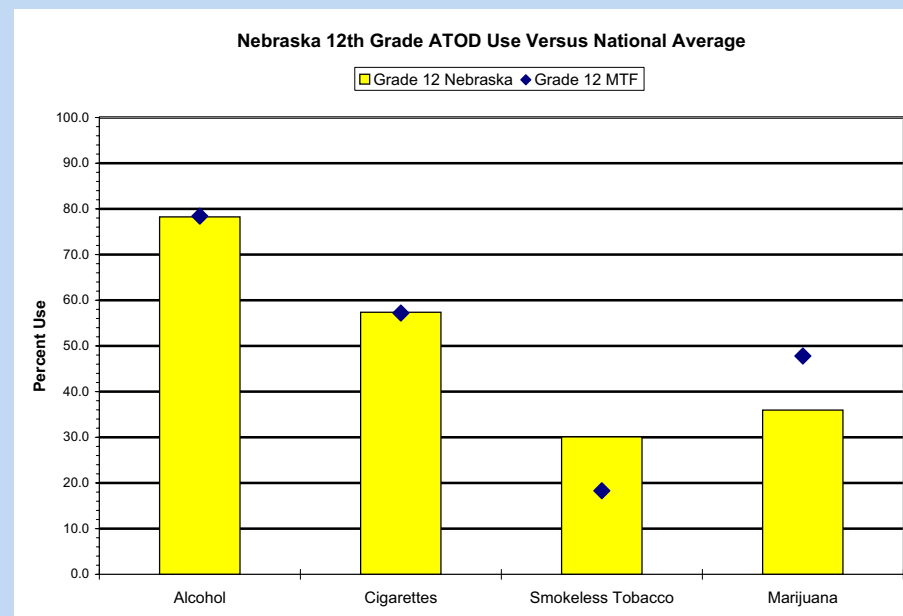


Figure 15



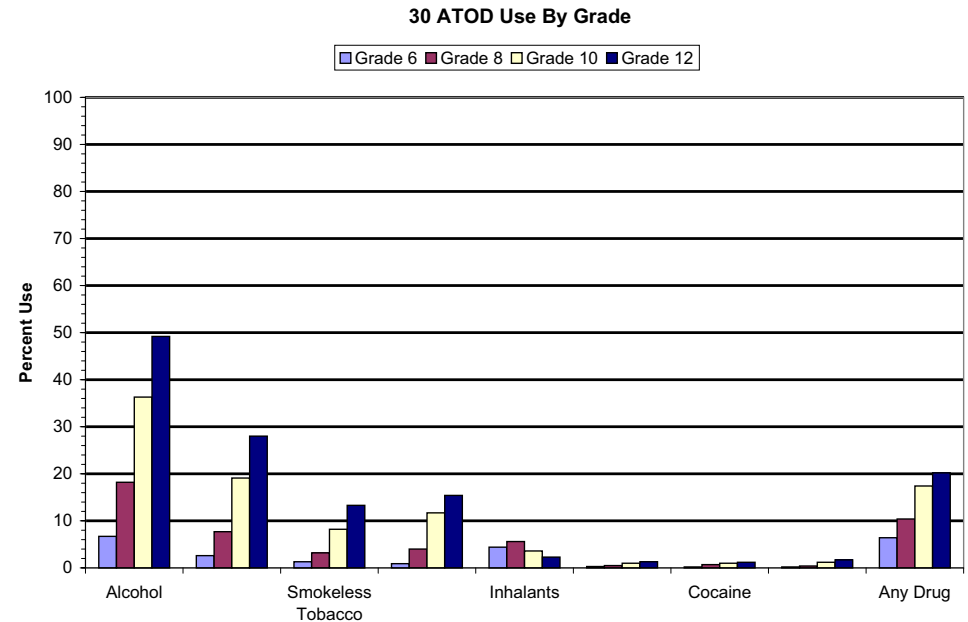
30-Day ATOD Use, By Grade

Nebraska 30-Day Usage

Among students who indicated they used ATODs in the past 30 days, substance use patterns matched trends in lifetime use patterns. As seen in Table 14, Nebraska students were most likely to report past 30-day use of alcohol (27.4%), followed by cigarettes (14.1%), marijuana (7.9%), smokeless tobacco (6.4%) and inhalants (4.0%). Thirty day use of hallucinogens, cocaine, and methamphetamines were all less than 1.0%.

An increase in substance use by grade is again observed for all substances except inhalants. Thirty day use of inhalants declines steadily from 8th grade (5.7%) to 12th grade (2.2%). Frequency of alcohol and cigarette use increases dramatically with increasing grade. Increases in the 30 day use of smokeless tobacco, any drug, and marijuana are steady but less dramatic. Increases in the use of other substances across grades are present, but small.

Figure 16



Nebraska Results Compared to National Results

Table 14 and Figures 17 through 19 show the percentage of Nebraska survey participants and youth from the MTF sample who used ATODs in the 30 days prior to completing the survey. When examining the Figures on the next page, note that the maximum scale value has been changed to 60%.

The 30 day use data show an interesting interaction between grade and survey population in Nebraska as compared to MTF. In younger grades, students in Nebraska use less of all substances than the national sample. However, as grade level increases, students in Nebraska begin to use more of all substances except marijuana. Marijuana use in Nebraska is consistently lower than the national average. In lower grades, living in Nebraska is an indicator of less use, while, in higher grades, living in Nebraska is an indicator of greater use. For less commonly used drugs/drug categories such as hallucinogens, cocaine, or any drug, Nebraska is at or below the MTF sample in all grades.

Table 14. Percentage of Nebraska Respondents Who Used ATODs During The Past Month by Grade

Question	Grade 6		Grade 8		Grade 10		Grade 12		Total Nebraska Sample
	Nebraska	MTF	Nebraska	MTF	Nebraska	MTF	Nebraska	MTF	
Alcohol	6.5	18.1	19.6	36.2	35.4	48.9	48.6	27.4	
Cigarettes	2.6	7.7	10.7	19.3	17.7	28.0	26.7	14.1	
Smokeless Tobacco	1.3	3.2	3.3	8.2	6.1	13.4	6.5	6.4	
Marijuana	0.9	4.0	8.3	11.9	17.8	15.6	21.5	7.9	
Inhalants	4.4	5.7	3.8	3.6	2.4	2.2	1.5	4.0	
Hallucinogens	0.3	0.6	1.2	1.0	1.6	1.3	2.3	0.8	
Cocaine	0.2	0.4	1.1	1.2	1.6	1.7	2.3	0.8	
Methamphetamines	0.2	0.7	---	1.0	---	1.3	---	0.8	
Any Drug	6.3	10.4	10.4	17.6	20.8	20.4	20.4	13.6	

The symbol --- is used to indicate an area where MTF data is not available.

Figure 17

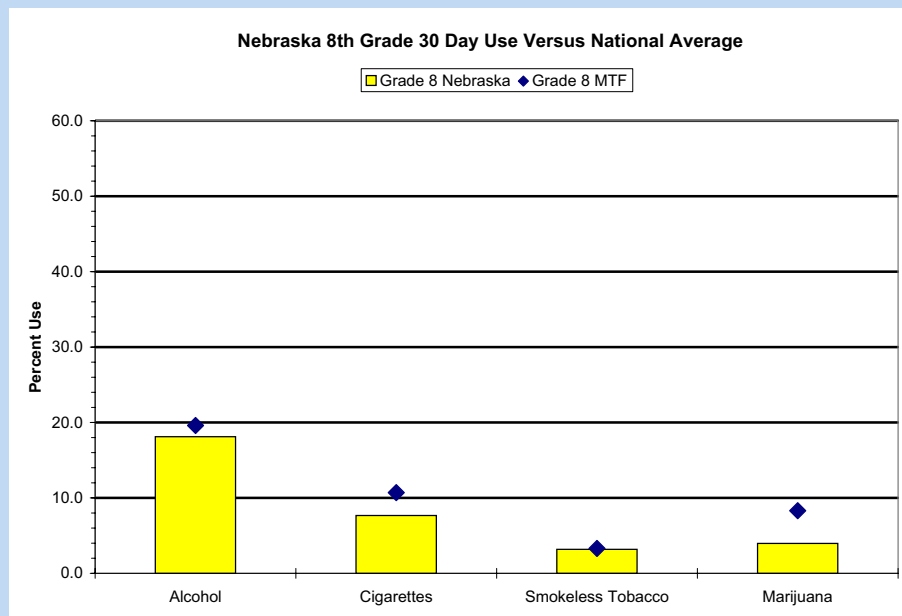


Figure 18

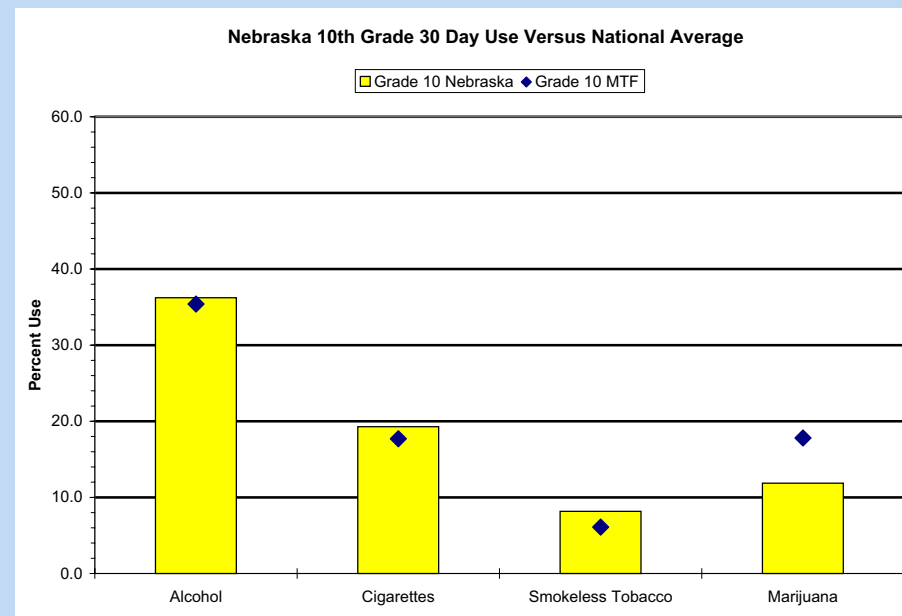
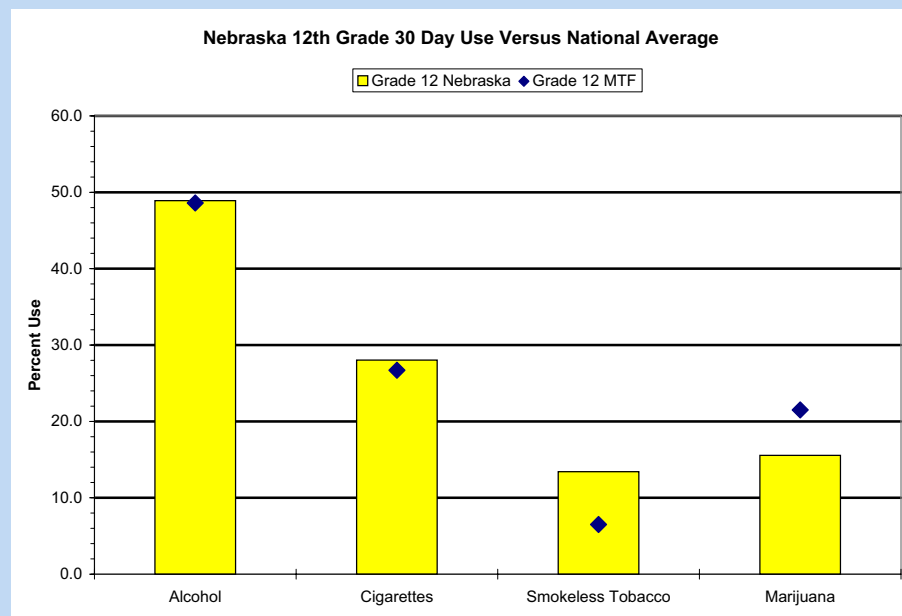


Figure 19



Lifetime ATOD Use, By Gender

Lifetime Use by Gender

Figure 20 on the next page shows the percentage of lifetime ATOD use for males and for females. Lifetime use is a measure of the experience that young people have had with various substances. While being female is generally considered a protective factor for substance use, it can be seen that males and females are very similar in their use of most substances and generally have substance use rates that are within one to three percent of each other. The data also indicate that females are beginning to use some substances more than males in certain grades. As seen in Table 15 and Figure 20, females have slightly higher lifetime use rates of cigarettes and methamphetamines, and show similar (but lower) use levels for all other drugs except smokeless tobacco. Nebraska males are more than twice as likely to have tried smokeless tobacco as are females. Males are more likely to have tried alcohol, marijuana and inhalants, and are also slightly more likely to have tried hallucinogens (2.6% to 1.9% respectively). Males and females are relatively equal in lifetime cocaine use.

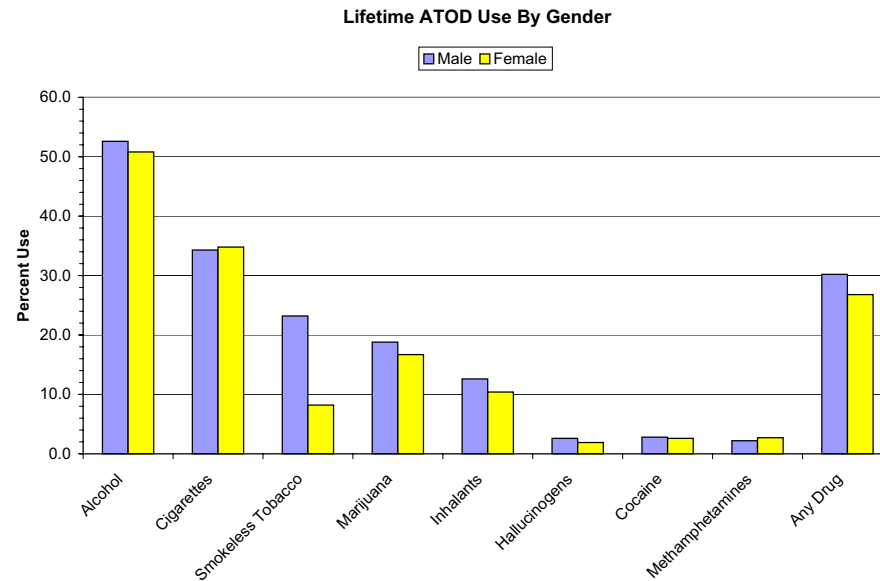
When examining substance use by grade (see Table 15), an interaction becomes clear between gender and grade for the most common substances (alcohol, cigarettes, and marijuana). For all three substances, males start out using well before females, but females quickly gain on or pass their male counterparts. By 12th grade, females use at a rate similar to or beyond males. This same interaction is found for methamphetamine lifetime use: females use less frequently in grade 6, but pass males in use beginning in grade 8.

For use of smokeless tobacco, males begin using earlier than females, and their use grows rapidly across grade (from 6.8% in 6th grade to 44.6% in 12th grade). Females also show an increase in smokeless tobacco use across grades, but their change is less dramatic (from 2.7% in 6th grade to 14.9% in 12th grade). For inhalant use, both males and females increase their use from 6th to 8th grade, but decrease use from 8th to 10th and again from 10th to 12th. Because “lifetime use” counts any person reporting a single use of a substance, it is interesting that more 6th and 8th graders report lifetime use of inhalants than 10th or 12th graders. (Because 10th and 12th grade students have passed 6th and 8th grade, their use from 6th or 8th grade would be reported in lifetime use for grades 10 and 12; even

though they have had more years to use, 10th and 12th graders’ lifetime use is lower). As noted previously, this may suggest that inhalant use is becoming more popular among younger students than it was in recent years.

Use of hallucinogens, cocaine, and any drug show a linear trend. Both males and females increase lifetime use across grades, but males remain slightly higher in use across the changing grades (statistically, this is known as a “main effect” for gender).

Figure 20

**Table 15. Percentage of Males and Females Who Used ATODs During Their Lifetime by Grade**

Drug Used	Grade 6		Grade 8		Grade 10		Grade 12		Total Nebraska Sample	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
Alcohol	25.1	16.3	43.0	40.4	64.8	65.0	77.9	78.8	52.6	50.8
Cigarettes	12.6	10.9	25.2	25.2	42.3	43.9	57.9	57.6	34.3	34.8
Smokeless Tobacco	6.8	2.7	13.3	5.1	29.0	9.7	44.6	14.9	23.2	8.2
Marijuana	3.3	1.6	9.5	6.8	25.8	23.1	37.7	34.7	18.8	16.7
Inhalants	12.1	8.2	13.8	12.2	12.4	11.9	12.0	8.8	12.6	10.4
Hallucinogens	0.6	0.3	1.4	1.0	3.3	2.4	5.3	3.9	2.6	1.9
Cocaine	0.7	0.2	1.3	1.6	3.7	3.3	5.7	5.1	2.8	2.6
Methamphetamines	0.4	0.1	0.9	1.0	3.2	4.0	4.5	5.6	2.2	2.7
Any Drug	16.5	10.9	22.4	19.3	36.2	33.1	45.3	41.7	30.2	26.8

30-Day ATOD Use, By Gender

30-Day Use by Gender

Table 16 on the following page shows the percentage of ATOD use in the past 30 days by males and females in grades 6 through 12. Total rates of 30 day use are very similar except in use of cigarettes and smokeless tobacco. Thirty-day cigarette use rates for all females were 2.0% higher than for all males (15.3% compared to 13.3%). Conversely, the 30-day use rate of smokeless tobacco was significantly higher for males (10.4% compared to 2.4% for females). Males were slightly more likely than females to use marijuana, inhalants, and any drug. Males were slightly more likely to use hallucinogens and cocaine. As with lifetime use, females revealed slightly higher total 30-day use rates for methamphetamines.

When examining substance use by grade (see Table 16), the interaction found in lifetime use again becomes clear for alcohol and cigarettes, but not marijuana. For alcohol and cigarettes, males start out using the substances more frequently than females, but females quickly gain on or pass their male counterparts by later grades. By 12th grade, females report use at a 30-day rate similar to (in the case of alcohol) or beyond males (in the case of cigarettes). This same interaction is found for methamphetamine 30-day use: females use less frequently in grade 6, draw even in grade 8, and pass males in use by grade 10. Female and male use of marijuana and any drug increases with an increase in grade. Though males tend to use inhalants at a higher rate than females, 30-day use for both males and females declines in 10th and 12th grade relative to 6th and 8th.

Findings for cocaine and hallucinogens are slightly less consistent. For example, males in 6th grade report use of hallucinogens twice as often as females in a 30-day period, and male use increases for every grade that follows. Female use, however, peaks in 10th grade. For cocaine, males begin more frequent use at a younger age, but are then passed by females in grade 10. By grade 12, however, males are again more likely to use cocaine in a 30-day period.

Figure 21

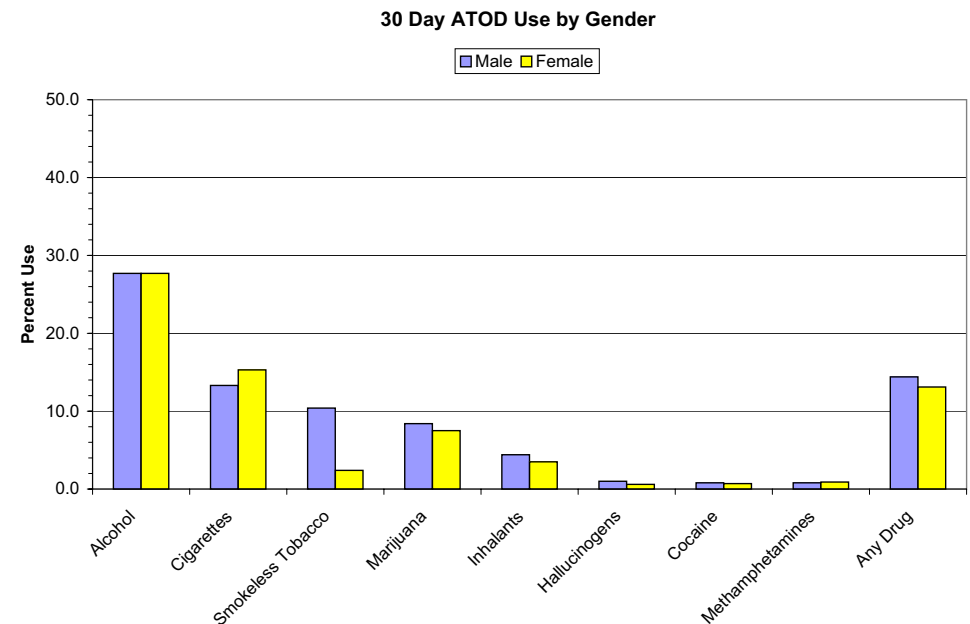


Table 16. Percentage of Males and Females Who Used ATODs During The Past Month by Grade

Drug Used	Grade 6		Grade 8		Grade 10		Grade 12		Total Nebraska Sample	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
Alcohol	8.5	4.9	18.1	17.8	35.6	37.0	49.5	49.3	27.7	27.7
Cigarettes	2.8	2.3	6.4	8.5	17.4	20.6	27.1	29.1	13.3	15.3
Smokeless Tobacco	1.7	0.8	4.3	2.1	13.4	3.0	22.8	3.8	10.4	2.4
Marijuana	1.2	0.5	4.1	3.3	12.5	10.8	16.1	14.9	8.4	75.0
Inhalants	5.3	3.5	5.6	5.2	3.6	3.5	3.0	1.7	4.4	3.5
Hallucinogens	0.4	0.2	0.6	0.6	1.2	0.8	1.9	0.6	1.0	0.6
Cocaine	0.4	0.1	0.7	0.7	1.0	1.1	1.3	0.9	0.8	0.7
Methamphetamines	0.3	0.0	0.4	0.4	0.9	1.6	1.5	1.7	0.8	0.9
Any Drug	7.7	5.1	10.4	10.0	18.3	16.9	21.4	19.7	14.4	13.1

Multiple Drug Use

Multiple Drug Use

The percentage of youth who use various substances in combination with other substances is shown by grade in Table 17 and by gender in Table 18. The data for grade and multiple use are also displayed graphically on the next page in Figure 22. For these data, the term “Any substance” is defined as using one or more of all the substances measured by the survey except alcohol and tobacco. Finally, the numbers in the total column differ for Table 17 and 18 because some students did not list their gender on the survey; hence, their responses could not be used in the calculations for the gender table.

Across grades, alcohol and tobacco use was most common followed by alcohol and any other substance. Alcohol and marijuana use was third, followed by marijuana and tobacco, and finally by alcohol, tobacco and marijuana. As seen in Figure 22, use of all combinations of substances increases with increasing grade. However, the largest jump in multiple use occurs between grade 8 and grade 10. This jump in use is particularly clear for alcohol and tobacco use, but occurs in all combinations. This larger increase is likely the result of students transitioning from elementary or middle school to high school. These findings indicate that efforts to prevent substance use should start well before students transition to high school.

An examination of multiple drug use by gender indicates males use more of all combinations of substances except alcohol, tobacco, and marijuana, which are used at an equal rate by males and females. In all cases, however, males are only slightly more likely to use the multiple substance combinations.

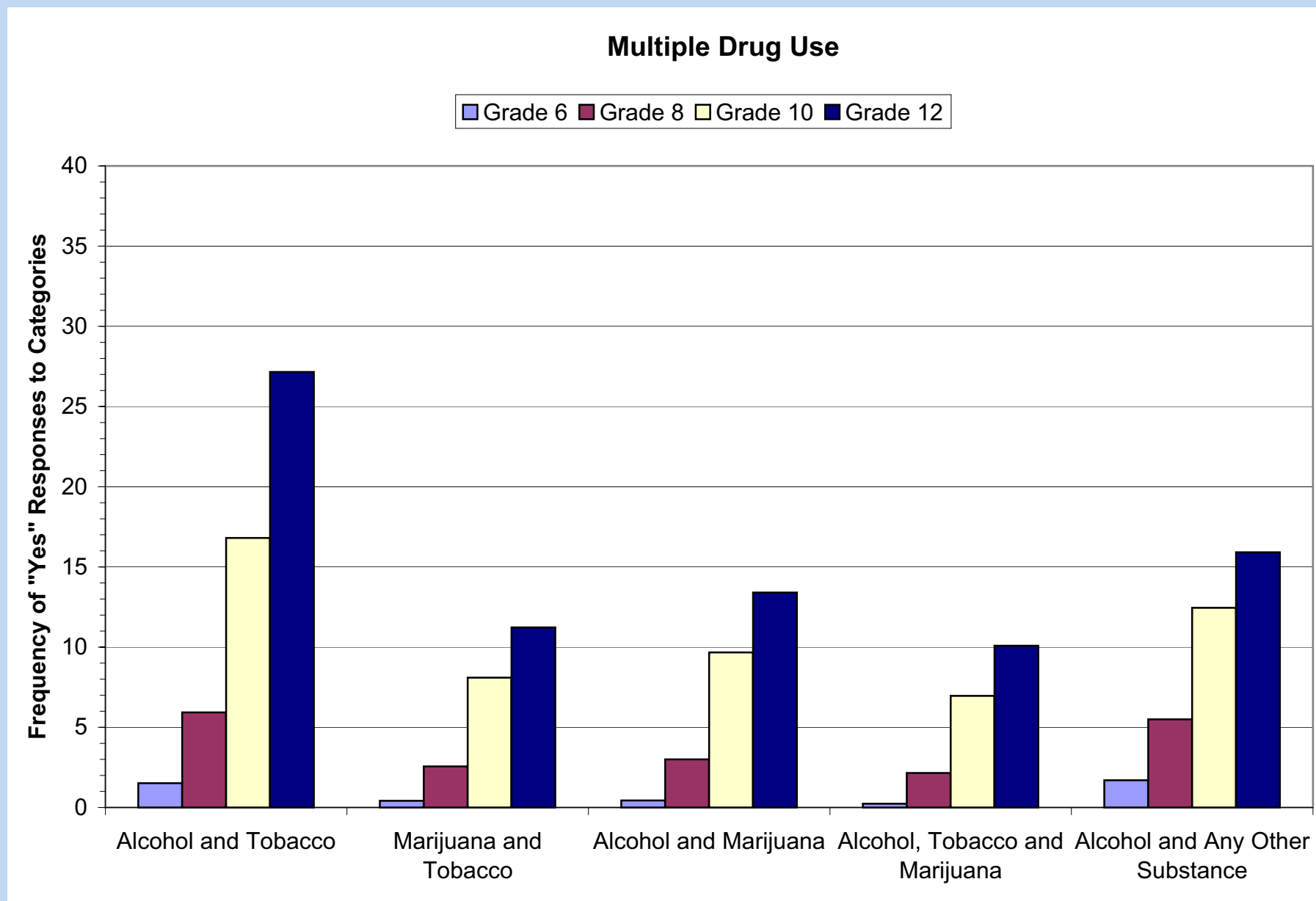
Table 17. Percentage of Students Using Multiple Substances in the Past 30 Days by Grade

Substance	Grade 6	Grade 8	Grade 10	Grade 12	Total
Alcohol and Tobacco	1.5	5.9	16.8	27.2	12.6
Marijuana and Tobacco	0.4	2.6	8.1	11.2	5.5
Alcohol and Marijuana	0.4	3.0	9.7	13.4	6.5
Alcohol, Tobacco and Marijuana	0.2	2.1	7.0	10.1	4.8
Alcohol and Any Other Substance	1.7	5.5	12.5	15.9	8.7

Table 18. Percentage of Students Using Multiple Substances in the Past 30 Days by Gender

Substance	Male	Female	Total
Alcohol and Tobacco	13.3	12.1	12.8
Marijuana and Tobacco	5.7	5.4	5.6
Alcohol and Marijuana	6.7	6.5	6.6
Alcohol, Tobacco and Marijuana	4.8	4.8	4.8
Alcohol and Any Other Substance	8.9	8.7	8.8

Figure 22



Perceived Harmfulness and Availability of ATODs

Perceived Harmfulness

When students perceive a substance as harmful, they are less likely to use it. The NRPFS asked students, “How much do you think people risk harming themselves (physically or in other ways) if they:” smoked cigarettes heavily, tried marijuana, smoked marijuana regularly, or drank alcohol regularly. Response categories were “No Risk,” “Slight Risk,” “Moderate Risk,” or “Great Risk.” Results for perceived harmfulness in Table 19 and Figure 23 (on the next page) display the percentage of students who indicated that using certain substances places people at “Great Risk” for health and other problems.

For all items except methamphetamines, Nebraska responses can be compared to the national MTF data. MTF data did not measure perceived risk of methamphetamine use. For Nebraska survey respondents, heavy smoking was perceived as placing people at great risk by over 70% of 6th and 8th graders, and these figures decline only slightly in 10th and 12th grade. Interestingly, while the perceived harm of heavy cigarette smoking declines across grades in the Nebraska sample, perceived harm increases across grade in the MTF sample. By grade 12, perceived risk of harm from smoking is significantly lower than the national average. This discrepancy from the national sample suggests smoking may be a particularly important area for Nebraska prevention efforts.

In both the national sample and the Nebraska sample, the perceived harmfulness of trying marijuana drops rapidly as grade increases (from 48.0% in grade 6 to 16.1% in grade 12). In fact, by grade 12, students in both the Nebraska and MTF samples perceive trying marijuana once or twice as holding the least risk of harm relative to all other substances. This same pattern is observed in perceptions of harm due to regular marijuana use. Even though most students in the Nebraska and MTF samples perceive regular marijuana use as potentially harmful (all values are above 50% perceiving great risk), the perception of harm declines rapidly with increasing grade (from 82.3% in the Nebraska sample, grade 6, to 58.9% in the Nebraska sample, grade 12).

Perceived harm from drinking daily declines with each increase in grade for the Nebraska sample. In contrast, in the MTF sample, perceived harm rises from 8th to 10th grade, and declines again in 12th.

It is important to note that the Nebraska sample, relative to the national sample, perceived greater harm in use of every substance except in the case of perceived harm of cigarette use by 12th graders. With that exception, the Nebraska sample compares favorably to the national sample.

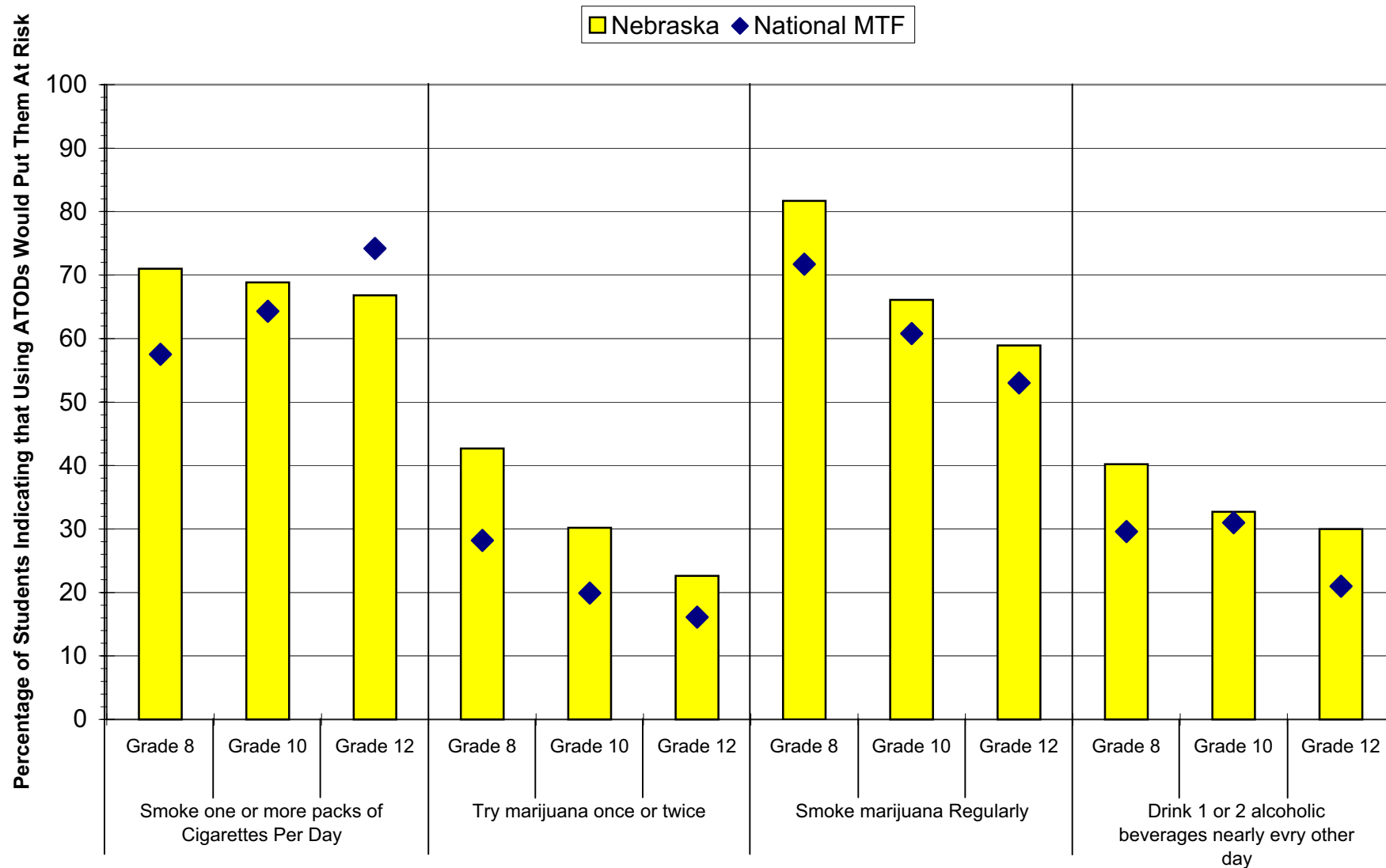
Table 19. Percentage of Nebraska Respondents and MTF Respondents Indicating the Following Drugs Place People at "Great Risk"

Items	Grade 6	Grade 8		Grade 10		Grade 12		Total Nebraska Sample
	Nebraska	Nebraska	MTF	Nebraska	MTF	Nebraska	MTF	
Smoke One or More Packs Of Cigarettes Per Day	70.2	71.0	57.5	68.9	64.3	66.8	74.2	69.3
Try Marijuana Once or Twice	48.0	42.7	28.2	30.2	19.9	22.6	16.1	36.0
Smoking Marijuana Regularly	82.3	81.7	71.7	66.1	60.8	58.9	53.0	72.5
One or Two Drinks Daily	45.5	40.2	29.6	32.7	31.0	30.0	21.0	37.1
Using Methamphetamines	83.6	89.6	---	91.0	---	92.5	---	89.3

The symbol --- is used to indicate an area where MTF data is not available.

Figure 23

Perceived Harm of Using ATODs: Nebraska Compared to National Averages



Perceived Availability

Availability of ATODs has been linked to substance abuse and violence. The NRPFS survey questionnaire included a question that asked: “how easy would it be to get some...” cigarettes, alcoholic beverages, marijuana, or other drugs (cocaine, LSD, or amphetamines). The response choices were: “Very Hard,” “Sort of Hard,” “Sort of Easy,” and “Very Easy.” Table 20 contains the percentage of youth who reported that it was “Sort of Easy” or “Very Easy” to get the substances.

It is important to note that all substances are perceived as increasingly easier to obtain as grade increases. This is true in both the Nebraska and national sample. Perceived availability of cigarettes and alcohol more than doubles from 6th to 8th and quadruples between 6th and 12th grade. Marijuana is perceived as more than 7 times more easily obtained in 12th grade than in 6th grade, and more than twice as easy to obtain in 8th compared to 6th. By 12th grade, alcohol, cigarettes, and marijuana are perceived as easily obtained by over 60% of the surveyed students. Finally, perceived availability of cocaine and other drugs also grows quickly across increasing grade level. Cocaine and other drugs are perceived as almost five times easier to obtain in 12th grade than in 6th, and nearly twice as easy in 8th relative to 6th.

However, the results reveal that Nebraska survey participants perceive all substances as being more difficult to obtain than the national average. In all categories and all grades, there is a 6.0% to 31.3% difference in perceived availability between Nebraska results and national results. This difference is also illustrated in Figure 25, which displays perceived availability of substances by students in grades 8, 10, and 12 in the Nebraska and national surveys.

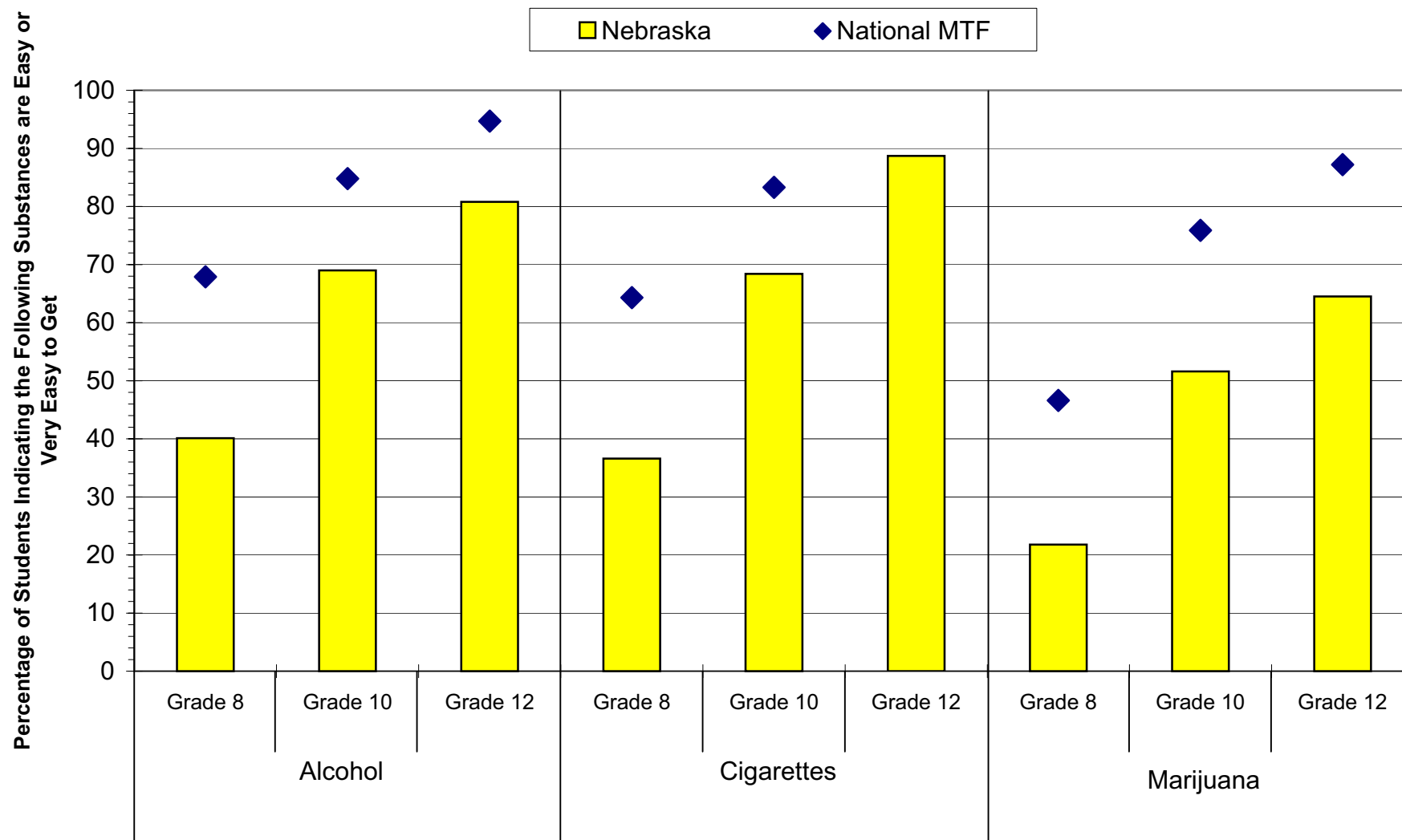
Table 20. Percentage of Nebraska Respondents and MTF Respondents Indicating the Following Drugs Are "Easy" or "Very Easy" to Obtain

Responses	Grade 6	Grade 8		Grade 10		Grade 12		Total Nebraska Sample
	Nebraska	Nebraska	MTF	Nebraska	MTF	Nebraska	MTF	
Ease of Obtaining Alcohol	18.4	40.1	64.3	69.0	83.3	80.8	---	53.3
Ease of Obtaining Cigarettes	172.0	36.6	67.9	68.4	84.8	88.7	94.7	53.8
Ease of Obtaining Marijuana	8.3	21.8	46.6	51.6	75.9	64.5	87.2	42.9
Ease of Obtaining Cocaine and Other Drugs	5.6	10.3	---	20.7	---	26.1	---	16.0

The symbol --- is used to indicate an area where MTF data is not available.

Figure 24

Perceived Availability of Cigarettes, Alcohol, and Marijuana: Nebraska Compared to the National Average



Perception of Peer Use Compared to Actual Personal Use

Perception of Peer Use Compared to Actual Personal Use

The questions assessing perceptions of peer use asked students: “How many people your age do you think...” smoke cigarettes, drink alcohol, smoke marijuana, or use methamphetamines. Response options for the items were: “None of them,” “Less than half of them,” “About half of them,” “More than half of them,” “All or almost all.” Table 21 and Figures 25 and 26 show personal use (number of occasions used) in relation to the perception that either more than half of peers use or almost all of them use.

The significance of this data is perhaps most clearly seen in Figures 25 & 26 which clearly indicate that the more students perceive others as using, the more likely they are to report use themselves. In all cases, these trends are almost perfectly linear. For example, among students who have never used alcohol, only 21.6 percent believe most students their age use. Among students who used alcohol once or twice, the number who think most of the students their age use jumps to 38.2 percent. Among students who have used alcohol more than 10 times, 78.7% believe most of the people their age use. These same trends are observed for marijuana, methamphetamine, and cigarette use.

There are a few logical interpretations of these correlational data. The first interpretation suggests that perceptions of peer approval might be related to heavier personal use; that is, perhaps students use more when they believe others their age use. Alternatively, perhaps students who use more rationalize their use by suggesting that most people their age use. Because these data are correlational (and not causal), however, another interpretation is equally viable. It is also possible that students who use more are surrounded by friends who use more; hence, perceptions of peer use might be quite accurate if they are using the people around them as the comparison standard. No matter what the nature of the relationship, there is nevertheless a clear association between perceived peer use and one’s own personal use.

Table 21. Percentage of Students Indicating Half or More of Their Peers Use a Substance

Drug					
Personal Lifetime Use Response Options	Alcohol	Marijuana	Methamphetamines	Personal Lifetime Use Response Options	Cigarettes
0 Occasions	21.6	7.7	3.0	Never	11.6
1-2 Occasions	38.2	23.3	3.9	Once or Twice	23.5
3-5 Occasions	51.9	28.9	10.4	Once in a While but not regularly	37.3
6-9 Occasions	62.0	37.9	13.2	Regularly in the past	39
10 or more Occasions	78.7	47.9	16.0	Regularly now	57.4

Figure 25

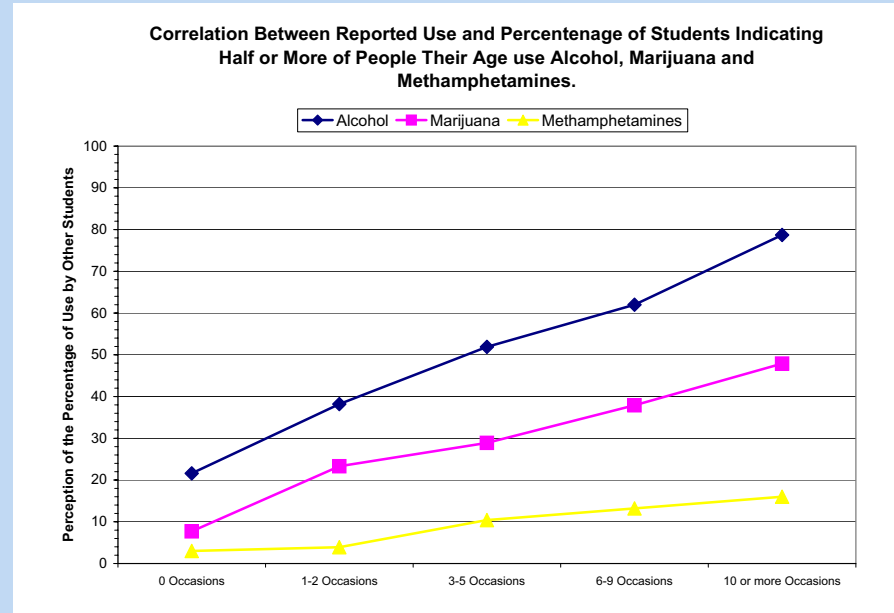
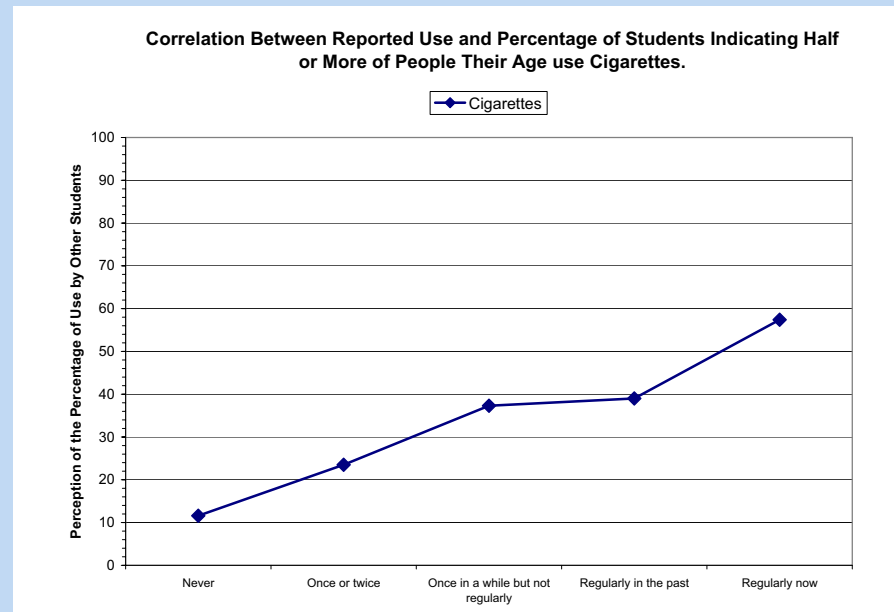


Figure 26



Substance Use in Relation to Perceived Parental Acceptability

Lifetime Use

When parents have favorable attitudes toward drug use, they influence the attitudes and behavior of their children. For example, parental approval of young people's moderate drinking, even under parental supervision, increases the risk of the young person using marijuana. Further, in families where parents involve children in their own drug or alcohol behavior (e.g., asking the child to light the parent's cigarette or to get the parent a beer) research shows there is an increased likelihood that their children will become drug abusers in adolescence.

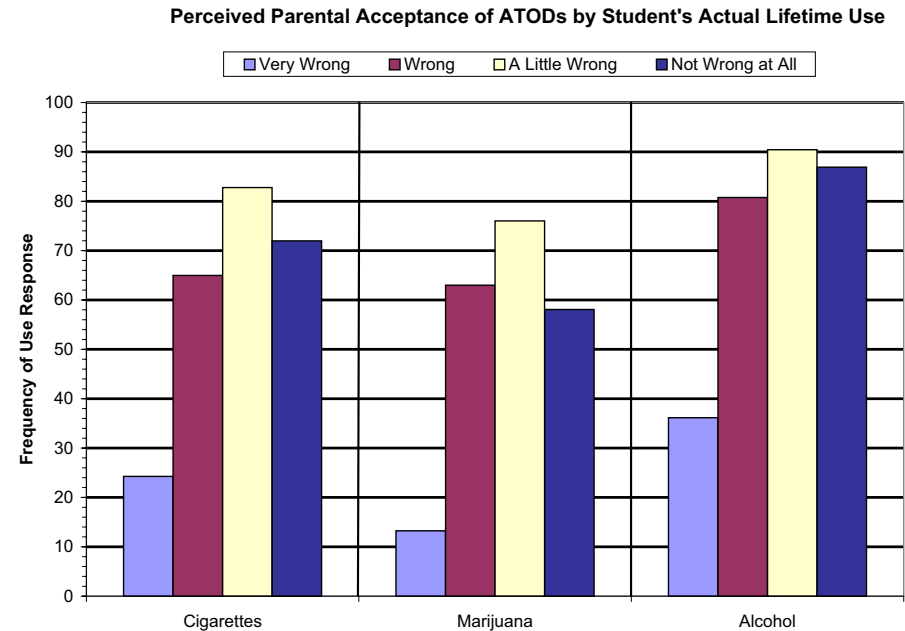
Table 22 and Figure 37 show lifetime substance use rates (i.e., student has used) as a function of perceived parental acceptability of the substance. Typically, even the slightest perception of parental approval leads to an increased use of the substance. This is exactly the pattern seen among Nebraska students.

Table 22. Lifetime Substance Use as a Function of Perceived Parental Acceptance

Substance	Perceived Level of Parental Acceptance			
	Very Wrong	Wrong	A Little Wrong	Not at all Wrong
Cigarettes	24.3	65.0	82.8	72.0
Marijuana	13.2	63.0	76.0	58.1
Alcohol	36.1	80.8	90.4	86.9

Across all substances, use rates more than double, (and, in the case of marijuana use, quadruple) if students perceive their parent's view of the substance as even mildly accepting. In the case of marijuana, for example, student use rises from 13.2% when parents are perceived as viewing marijuana use as "Very Wrong" to over 60% when student perceptions are that their parents feel marijuana use is only "Wrong." The same patterns are evident for cigarette and alcohol use as well.

Figure 27



30-Day Use

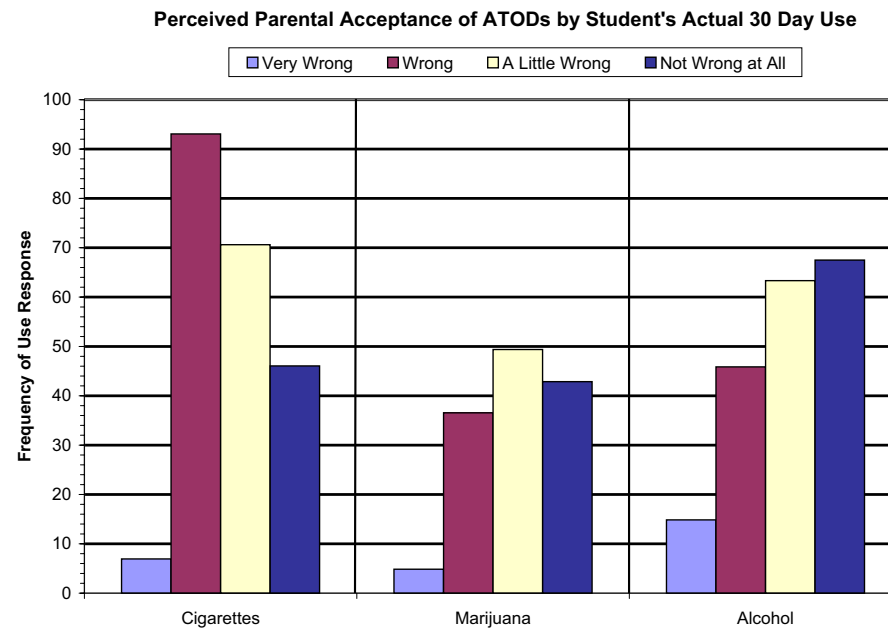
The same pattern observed with lifetime use is even more apparent in 30-day use. As seen in Table 23 and Figure 28, even the slightest perception of parental acceptance increases student use dramatically. In the case of cigarettes, where students perceived the parental view of use as only "Wrong" as opposed to "Very Wrong," 30-day use rates increased from 6.9% to 93.1%. That is, less than 7% of students who reported that their parents perceived smoking as "Very Wrong" also reported smoking within the last 30 days, while students who reported a lesser degree of parental disapproval ("Wrong" versus "Very Wrong") reported smoking at rates more than 13 times higher. While this category of perceived parental views correlated with the highest rates of students reporting smoking in the past 30 days, it is important to note that, for both lifetime and 30-day use, the

number of students reporting their parents feel use is “Not Wrong at All” is quite small. Accordingly, some caution needs to be used when interpreting the accuracy of the values for this response category and when comparing these values to other categories.

Altogether, results of student use as a function of perceived parental acceptance serve to highlight the importance of parents having strong and clear standards and rules when it comes to ATOD use.

Table 23. 30-Day Substance Use as a Function of Perceived Parental Acceptance				
Substance	Perceived Level of Parental Acceptance			
	Very Wrong	Wrong	A Little Wrong	Not Wrong at All
Cigarettes	6.9	93.1	70.6	46.1
Marijuana	4.9	36.5	49.4	42.9
Alcohol	14.8	45.9	63.3	67.5

Figure 28



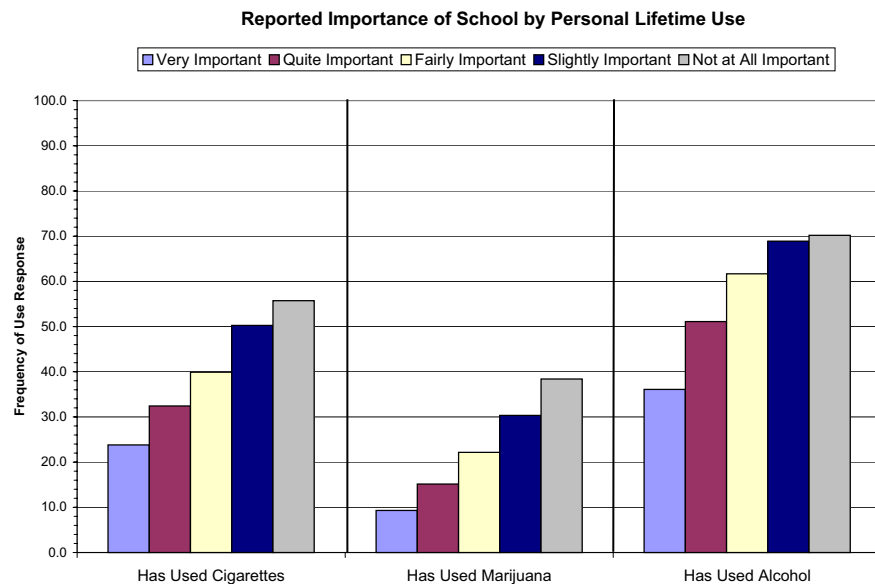
Lifetime and 30 Day Substance Use as a Function of Reported School Importance

Lifetime Use

As seen in Table 24 and Figure 29, the more important students believe school is, the less likely they are to use cigarettes, marijuana, or alcohol. In fact, students who perceive school as “very important” are half as likely to use drugs as students who see school as “slightly important” or “not important at all.”

Substance	Reported School Importance				
	Very Important	Quite Important	Fairly Important	Slightly Important	Not at all Important
Cigarettes	23.8	32.4	39.9	50.3	55.7
Marijuana	9.3	15.2	22.2	30.3	38.4
Alcohol	36.1	51.1	61.7	68.9	70.2

Figure 29

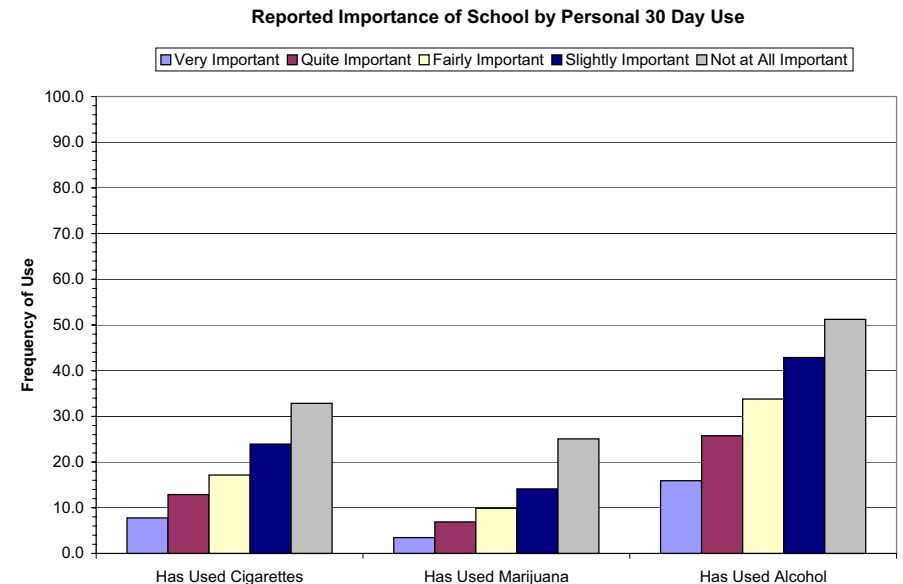


30-Day Use

As seen in Table 25 and Figure 30, the same pattern seen in lifetime use is also seen in 30-day use. Specifically, the more important students feel school is, the less likely they are to use. These data underscore the need to establish the importance of school with youth.

Substance	Reported School Importance				
	Very Important	Quite Important	Fairly Important	Slightly Important	Not at all Important
Cigarettes	7.8	12.9	17.2	23.9	32.8
Marijuana	3.5	6.9	9.9	14.1	25.1
Alcohol	15.9	25.7	33.8	42.9	51.2

Figure 30



Sources and Places of Alcohol and Cigarette Use

Sources and Places of Alcohol Use

Table 26 and Figures 31 and 32 explain data related to the reported sources and places of last alcohol use by those Nebraska students who reported use. Figure 31 shows the last sources of alcohol cited by students who reported use, and Figure 32 shows the last places they reported using alcohol.

When examining sources and places of alcohol, it is important to note that the categories are not mutually exclusive, and students were allowed to select more than one option. For example, students who obtained alcohol from a brother or sister might have been at home drinking without parental permission. Similarly, students who report getting alcohol from someone over 21 might also have gotten the alcohol from a stranger. Accordingly, total percentages will not sum to 100% within grade, as selection of multiple options is evident.

Across all grades, the largest source of alcohol among Nebraska students is from someone over 21. This source becomes increasingly more used as students progress from grade 6 to grade 12. Obtaining alcohol from someone under 21 also becomes increasingly likely with increases in grade from 6 to 10, but drops off slightly in grade 12. Although not a large or frequent source of alcohol, the likelihood of obtaining alcohol from a stranger also increases with increase in grade level.

For younger students, the major reported sources of alcohol are parents and relatives. Parents and relatives decline as sources of alcohol with increasing grade level and drinking at home, with or without parental permission, is least reported in the 12th grade.

Obtaining alcohol with a fake ID is infrequently reported, but is the most common in grade 6, more than twice as common as any other grade. Purchasing alcohol without a fake ID is also relatively rare. In fact, this linear increase is exactly what occurs in grades 8, 10, and 12. Grade 6, however, is a problematic exception. What is not clear from these data are how frequently students try to purchase alcohol with or without a fake ID. It may be the case that younger students are more persistent in attempting to purchase alcohol, while older students are less persistent and have other sources. Finally, stealing alcohol from a store is also relatively rare, but this source of obtaining alcohol increases from grade 6 to

grade 10, but then drops off again in grade 12. The drop off by grade 12 is likely the result of 12th graders being able to obtain the alcohol themselves and more easily through other sources.

Sixth grade students who reported drinking are most likely to report drinking at home. Across all other grades, the most frequently reported place of alcohol use is at someone else's house. Students also become more likely to drink at someone else's house as they increase in grade, and less likely to drink at their own houses. Because drinking at home becomes less popular and drinking at someone else's house becomes more popular with increasing grade, it may be the case that a relatively small number of houses, supervised or unsupervised, are providing the places to drink for many students.

It may also be the case that, as students increase in grade level, they are provided more places to drink in general. Drinking in open areas, at sporting events, restaurants, buildings, motels and cars all become more likely with increasing grade. As the number of potential sources increase, as well as the number of places to drink, one's home may become a less attractive or less necessary option. This interpretation is further supported by data on adult presence during drinking. Sixty percent of all sixth graders that reported drinking alcohol (not just a sip or taste) also reported that one or more adults (persons 21 years of age or older) were present. The reported presence of adults during youth drinking declined in grades 8 (47%) and 10 (36%), then leveled off in grade 12 (37%). It may be that younger students are dependent on parental permission and drinking at home in order to drink at all. Interestingly enough, social acceptance of youth drinking by adults, as measured by adult presence during underage drinking, seems to be markedly higher than adult social acceptance of youth smoking, as illustrated by Table 28.

Table 26.

Sources and Places of Alcohol Use				
	Grade 6	Grade 8	Grade 10	Grade 12
The last time I drank alcohol I...				
Bought It WITH a Fake ID	3.6	1.7	0.9	1.4
Bought It WITHOUT a Fake ID	3.4	2.5	3.0	4.6
Got It From Someone 21 OR OLDER	46.5	51.9	64.5	76.8
Got It From Someone UNDER 21	17.2	32.7	41.8	38.0
Got It From a Brother/Sister	13.0	17.9	17.2	15.6
From Home WITH Parent's Permission	34.6	26.4	18.7	15.3
From Home WITHOUT Parent's Permission	23.4	30.5	27.5	18.8
Got It From Another Relative	29.3	26.3	20.2	15.7
A Stranger Bought It For Me	4.2	5.1	11.0	14.1
Took It From a Store	2.0	2.9	3.1	2.4
Other	16.6	25.7	22.2	16.5
On the last day I had alcohol, I drank at...				
Home	58.6	48.7	36.9	30.6
Someone Else' Home	40.6	58.8	72.5	78.2
Open Area	10.4	16.5	26.1	28
Sporting Event or Concert	2.7	5.9	7.7	9.7
Restaurant or Bar	3.8	6	5.8	7.9
Empty Building or Site	4.6	5	5.6	5.4
Hotel/Motel	5.9	8.3	11.0	14.4
In a Car	15.5	19.8	36.5	41.8
One or More Adults Present	60.5	46.7	36.5	37.3

Figure 31

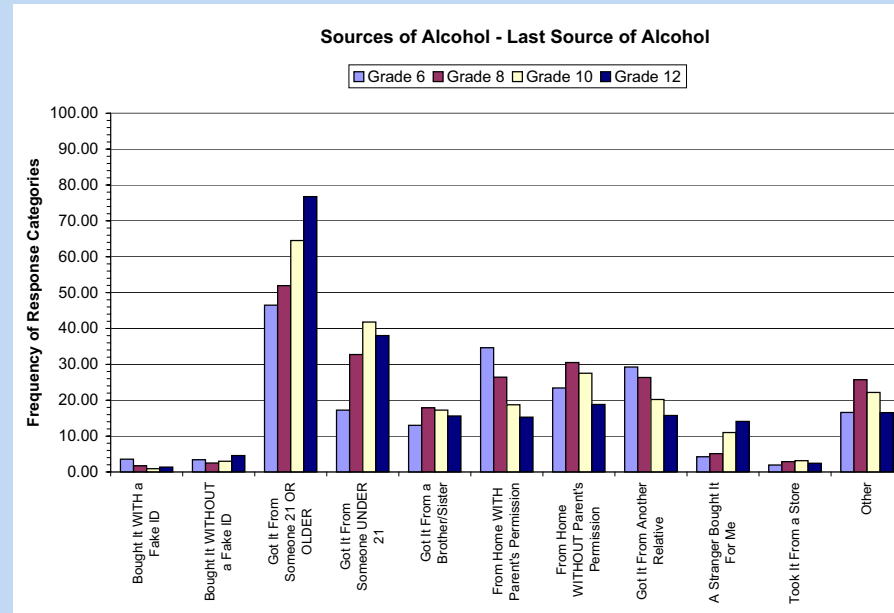
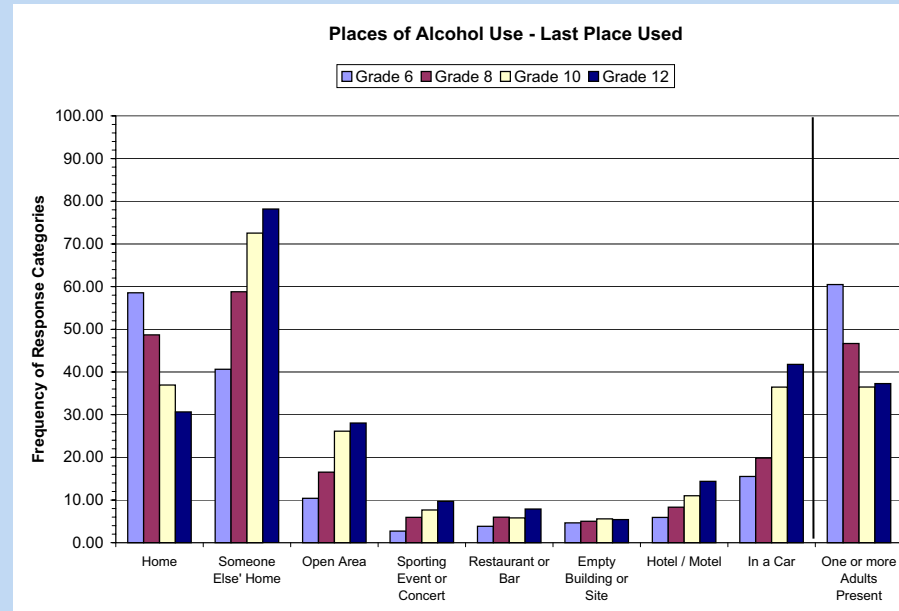


Figure 32



Sources and Places of Alcohol and Cigarette Use

Sources and Places of Cigarette Use

Table 27 and Figures 33 and 34 explain data related to sources and places of cigarette use for Nebraska students reporting they had used. Figure 33 shows from where students obtained cigarettes last time they smoked, and Figure 34 shows the last place they smoked.

When examining sources and places of cigarette use, it is important to note that the categories are not mutually exclusive, and students were allowed to select more than one option. For example, students who obtained cigarettes from a brother or sister might have been at home smoking without parental permission. Similarly, students who report getting cigarettes from someone over 18 might also have gotten the cigarettes from a stranger. Accordingly, total percentages will not sum to 100% within grade, as selection of multiple options is evident.

Across all grades, the largest reported source of cigarettes among Nebraska students is from someone over 18. This source becomes increasingly more used as students progress from grade 6 to grade 10. This source drops slightly from grade 10 to 12. Obtaining cigarettes from someone under 18 also becomes increasingly likely with increases in grade from 6 to 10, but drops off slightly in grade 12. Obtaining cigarettes from a relative and from a stranger follows the same pattern. Relatives and strangers increase as sources of cigarettes until grade 10, but decline as sources in grade 12.

This consistent pattern of no longer needing others to obtain cigarettes is likely the result of the fact that many 12th graders are themselves 18 and can, therefore, buy cigarettes legally. Support for this point is found in the frequency of obtaining cigarettes without a fake ID. This category rises slightly in use from grade 6 to grade 10, but then jumps rapidly in grade 12, increasing from 8.6 percent in grade 10 to 32.2% in grade 12. Clearly, by grade 12, many students are legally purchasing cigarettes on their own.

For younger students, the major reported sources of cigarettes are from the home without parental permission and from a vending machine. These sources decline in student utilization from grade 6 to grade 12. Although an infrequent method of obtaining cigarettes, the frequency of purchasing with a fake ID rises very slightly from grade 6 to grade 12. Stealing from a store is most likely in grade

6, followed by grades 10 and 8, and finally grade 12 (in which stealing is least likely).

Brothers and sisters increase as sources of cigarettes from grade 6 to grade 8, but then decline as sources in grade 10 and again in grade 12. Obtaining cigarettes from home with parental permission is most likely in 6th grade, followed by grade 10, grade 8 and grade 12.

From grade 6 to grade 12, sporting events and concerts, restaurants and bars, motels, and cars all increase as the preferred places to smoke. The increase in car smoking is particularly pronounced, rising from 20.4% in grade 6 to 59.0% in grade 10 and 70.0% in grade 12. Smoking at someone else's home or in an open area both increase in frequency from grades 6 to 10, but decline in grade 12. Smoking at one's own home, as well as in an empty building are most frequent in grades 8 and 10, but least frequent in grades 6 and 12.

Examined in conjunction with places of alcohol use, it is clear that cars are frequently used and even preferred as places for both smoking and drinking. Moreover, smoking and drinking in a car become more frequent with increases in grade.

As noted previously, students report much lower rates of smoking in front of adults than they do for drinking in front of adults. As Figure 28 illustrates, more than four times as many sixth graders, and three times as many 8th graders, reported drinking in front of adults than reported smoking in front of adults. Tenth and 12th grade students also reported significantly lower rates of smoking in the presence of adults than they did for drinking in the presence of adults.

Table 27.**Sources and Places of Cigarette Use**

	Grade 6	Grade 8	Grade 10	Grade 12
The last time I smoked a cigarette I...				
Bought It WITH a Fake ID	1.7	2.0	1.9	2.1
Bought It WITHOUT a Fake ID	4.5	5.4	8.6	32.2
Got It From Someone 21 OR OLDER	32.4	43.9	65.1	61.7
Got It From Someone UNDER 21	33.8	45.3	48.1	27.6
Got It From a Brother/Sister	13.1	15.1	13.8	11.4
From Home WITH Parent's Permission	12.6	9.8	11.6	8.3
From Home WITHOUT Parent's Permission	32.7	29.5	19.5	10.5
Got It From Another Relative	12.8	13.3	14.8	9.1
A Stranger Bought It For Me	4.7	6.3	7.9	4.7
Took It From a Store	6.4	3.7	4.5	3.1
Got It From a Vending Machine	24.6	22.3	14.1	12.2
On the last day I smoked, I smoked at...				
Home	36	39.6	37.4	31.6
Someone Else' Home	45.8	52.5	53.7	48.7
Open Area	29.1	39.2	45.7	43.1
Sporting Event or Concert	5.6	8.1	13.3	15.4
Restaurant or Bar	4.5	6.6	10.4	18.6
Empty Building or Site	9.8	11.2	11.1	8.6
Hotel/Motel	4.2	6.6	11.0	15.2
In a Car	20.4	32.1	58.9	70.0
One or More Adults Present	13.4	16.4	20.2	27.7

Table 28.**Alcohol and Tobacco With One or More Adults Present**

	Grade 6	Grade 8	Grade 10	Grade 12
Cigarettes	13.4	16.4	20.2	27.7
Alcohol	60.5	46.7	36.5	37.3

Figure 33

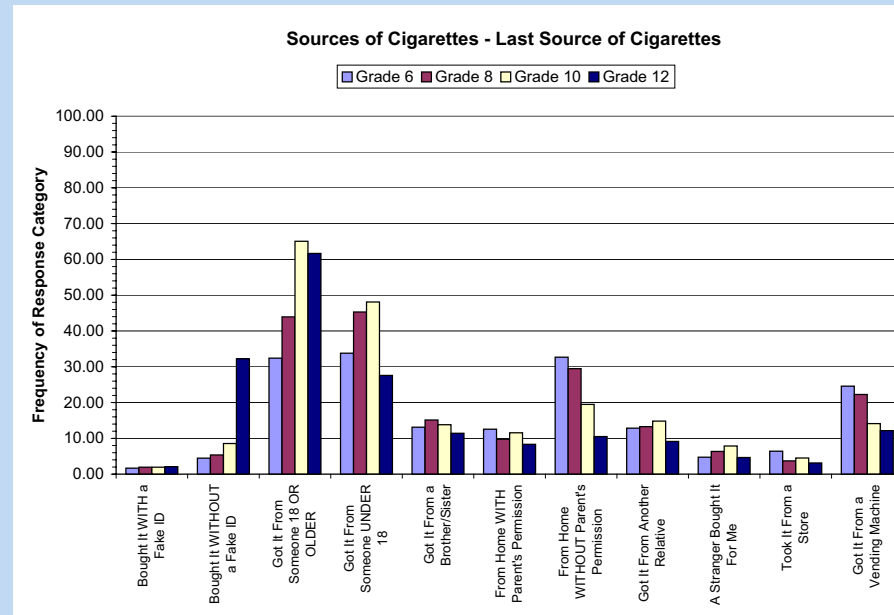
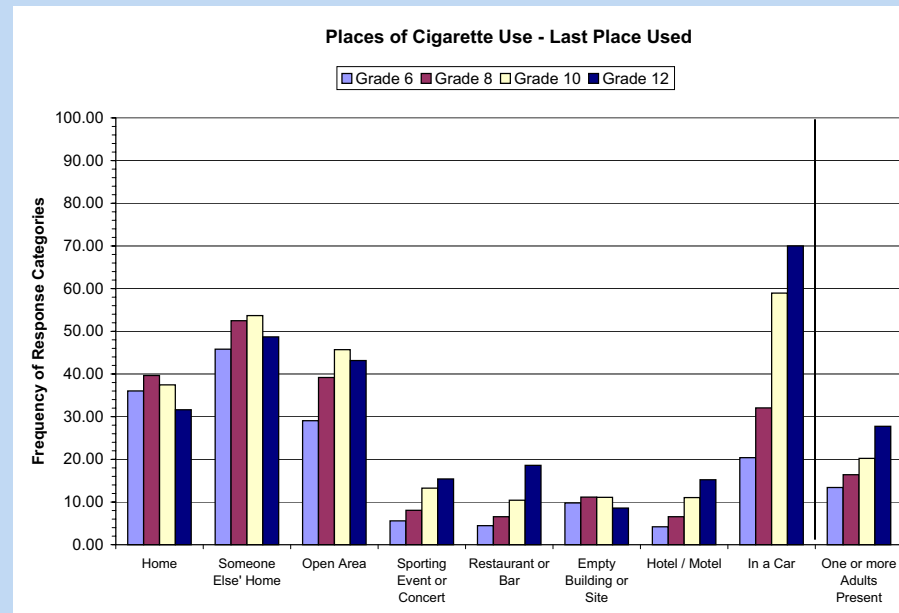


Figure 34



Age of Initiation: Anti-Social Behaviors

Age of Initiation: Anti-Social Behaviors

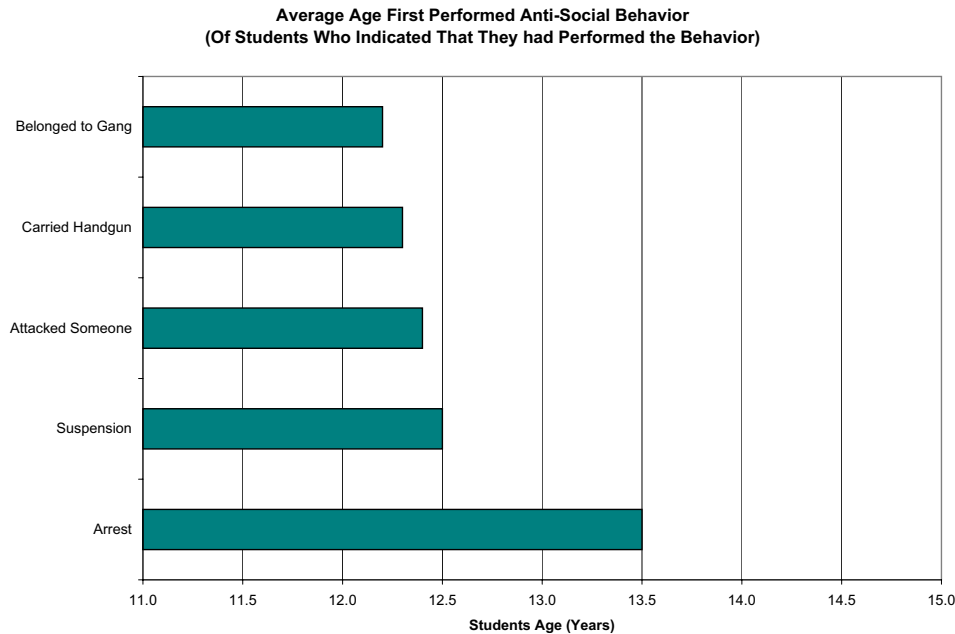
As seen in Figure 35 and Table 28, of students who have performed anti-social behaviors, most of them began the behaviors just before they were twelve and one-half years old. Only in the case of first arrest did students begin performing the behavior after they turned 13 (at 13.5).

The order in which the anti-social behaviors were performed follows a somewhat intuitive pattern. Although separated by less than a month in all cases, students report joining a gang first. Shortly after that comes the first time carrying a handgun, and then attacking someone. Suspension occurs fourth, and first arrest occurs one year after first suspension.

Table 29.

Age of Initiation: Anti-Social Behavior	
Behavior	Average Age First Performed Behavior (Of Students Who Indicated That They Had Performed the Behavior)
Belonged to Gane	12.2
Carried Handgun	12.3
Attacked Someone	12.4
Suspension	12.5
Arrest	13.5

Figure 35



Dangerous and Antisocial Behavior, Perceptions and Attitudes by Gender and Grade

Dangerous and Anti-Social Behaviors by Gender

Figure 36 and Table 29 show the data for dangerous and anti-social behavior by gender. Data represent frequencies for males and females who indicated they performed the behavior on at least one occasion in the past year. As seen below, males are more likely to report all the behaviors than are females, with the exception of riding with a drunk driver. Females are 6.3% more likely to ride with a drunk driver. Males, however, are only .6% more likely to drive drunk. This discrepancy suggests females are riding with drunk drivers not represented in the sample (e.g. older drivers). For both genders, riding with a drunk driver is the most frequently reported anti-social and dangerous behavior.

In some cases however, males are only slightly more likely to report the dangerous or anti-social behaviors than are females. Males are only 1.7% more likely to binge drink and 1.6% more likely to be drunk or high at school. For most of the other categories, males are much more likely to report engaging in dangerous

Figure 36

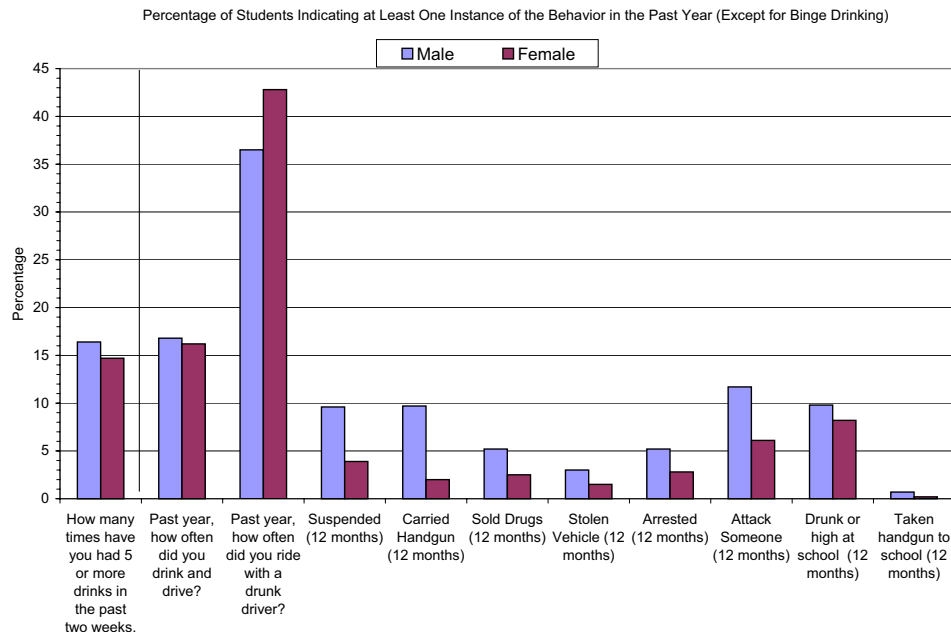


Table 30. Percentage of Students Indicating at Least One Instance of the Behavior in the Past Year (Except Binge Drinking)

Item	Male	Female	Total
How many times have you had 5 or more drinks in the past two weeks?	16.4	14.7	15.6
Past year, how often did you drink and drive?	16.8	16.2	16.5
Past year, how often did you ride with a drunk driver?	36.5	42.8	39.3
Suspended (12 months)	9.6	3.9	7.0
Carried Handgun (12 months)	9.7	2.0	6.3
Sold Drugs (12 months)	5.2	2.5	4.0
Stolen Vehicle (12 months)	3.0	1.5	2.4
Arrested (12 months)	5.2	2.8	2.1
Attack Someone (12 months)	11.7	6.1	9.2
Drunk or high at school (12 months)	9.8	8.2	9.1
Taken a handgun to school (12 months)	0.7	0.2	0.5

or anti-social behaviors. Males are more than twice as likely as females to be suspended, sell drugs, or steal a vehicle, and just less than twice as likely to attack someone or be arrested. For both genders, taking a handgun to school is the least frequently performed of the dangerous and anti-social behaviors, but males are 3.5 times more likely to take a handgun to school than are females.

Dangerous and Anti-Social Behaviors by Grade

Figure 37 and Table 30 show the same data by grade instead of gender. As seen on the next page, most dangerous and anti-social behaviors increase by grade. Specifically, frequency of binge drinking, drinking & driving, riding with a drinking driver, selling drugs, being arrested, and being drunk or high at school

increases with increasing grade. All of the most common of the problematic behaviors are alcohol-related. Across all grades and behaviors, Nebraska students are most likely to report riding with a drinking driver, followed by drinking and driving and binge drinking. The fourth most frequent behavior across grades is being drunk or high at school.

Interestingly, some of the behaviors display a curvilinear pattern, first becoming worse with increasing grade, but then declining in prevalence by grade 12. Although the curvilinear trends are frequently seen, interpretation of the meaning of the trends is ambiguous. The observed patterns may be the result of differences in the populations composing grades rather than differences due to grade level. These differences may also be due to the fact that the responses reflect behaviors reported by youth who have remained in school and who were in attendance at school on the day of the survey. Youth that have dropped out of school are not included in the survey, and so information on their behaviors is not included. Nevertheless, being suspended, attacking someone and stealing a vehicle increase

Figure 37

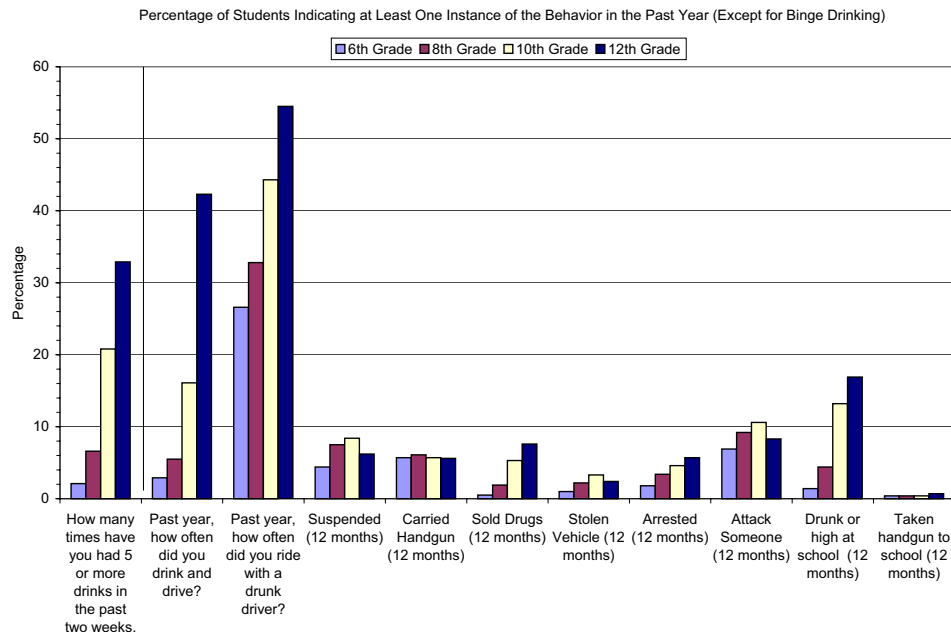


Table 31. Percentage of Students Indicating at Least One Instance of the Behavior in the Past Year					
Item	6th Grade	8th Grade	10th Grade	12th Grade	Total
How many times have you had 5 or more drinks in the past two weeks?	2.1	6.6	20.8	32.9	15.3
Past year, how often did you drink and drive?	2.9	5.5	16.1	42.3	16.2
Past year, how often did you ride with a drunk driver?	26.6	32.8	44.3	54.5	39.5
Suspended (12 months)	4.4	7.5	8.4	6.2	6.7
Carried Handgun (12 months)	5.7	6.1	5.7	5.6	5.8
Sold Drugs (12 months)	0.5	1.9	5.3	7.6	3.8
Stolen Vehicle (12 months)	1.0	2.2	3.3	2.4	2.3
Arrested (12 months)	1.8	3.4	4.6	5.7	3.9
Attack Someone (12 months)	6.9	9.2	10.6	8.3	8.8
Drunk or high at school (12 months)	1.4	4.4	13.2	16.9	8.9
Taken a handgun to school (12 months)	0.4	0.4	0.4	0.7	0.5

in prevalence from grade 6 to grade 10, but decline from 10 to 12. Carrying a handgun also displays a curvilinear pattern, rising from grade 6 to 8, but dropping in grades 10 and 12. Prevalence of taking a handgun to school remains steady from grade 6 to grade 10 (at .4%), but nearly doubles in grade 12 (to .7%).

Attitudes and Perceptions of Violence by Grade

As seen in their behaviors, students' attitudes and perceptions of violence-related issues display some linear trends. Student perception of the ease of obtaining a gun increases with increasing grade (from 12.8% in grade 6 to 28.2% by grade 12). The extent to which students feel safe in their neighborhood improves with increasing grade. In grade 6, 3.5%

of students report not feeling safe in their neighborhood, but this number declines to 1.1% by grade 12.

Other attitudes and perceptions display curvilinear trends. As before, although curvilinear trends are observed, interpretation of the meaning of the trends is ambiguous. The perception that it is not wrong to take a handgun to school, not wrong to pick a fight and not wrong to attack someone increases from grade 6 to grade 10, but then declines in grade 12. The percentage of students who would push a kid back who pushed them also increases from grade 6 to grade 10, but declines in grade 12.

The number of students reporting they belonged to a gang at some point is highest in grades 6 and 8, but declines in grade 10 and again in grade 12. Because these data are cross-sectional and refer to lifetime membership (i.e., have they ever belonged), this does not imply that fewer students are joining gangs; it actually suggests that more students are joining gangs than in recent years, and they do

Figure 38

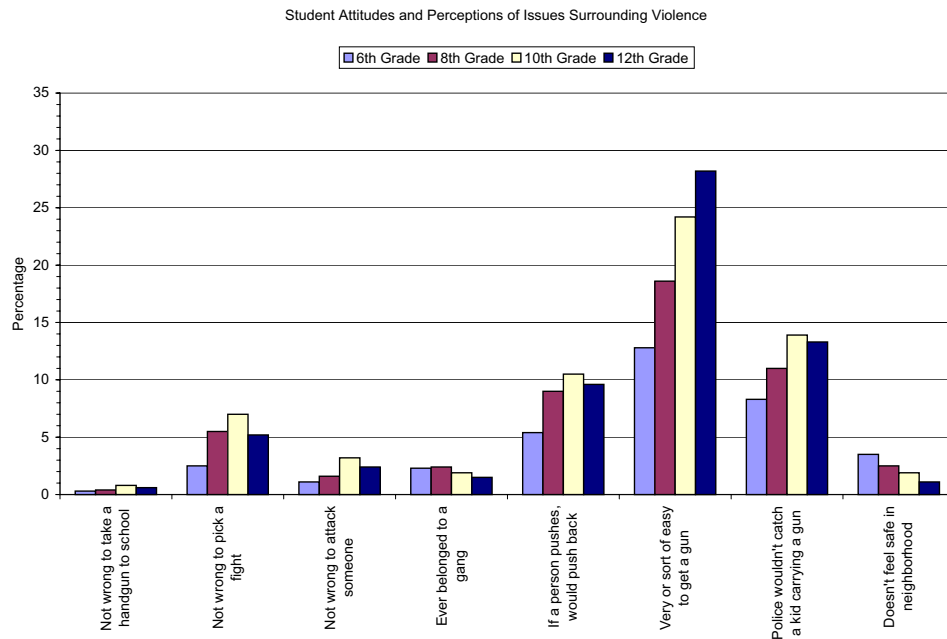


Table 32. Students Attitudes and Perceptions of Issues Surrounding Violence					
Item	6th Grade	8th Grade	10th Grade	12th Grade	Total
Not wrong to take a handgun to school	0.3	0.4	0.8	0.6	0.5
Not wrong to pick a fight	2.5	5.5	7.0	5.2	5.1
Not wrong to attack someone	1.1	1.6	3.2	2.4	2.1
Ever belonged to a gang	2.3	2.4	1.9	1.5	2
If a person pushes, would you push back	5.4	9.0	10.5	9.6	8.7
Very or sort of easy to get a gun	12.8	18.6	24.2	28.2	21.2
Police wouldn't catch a kid carrying a gun	8.3	11.0	13.9	13.3	11.7
Doesn't feel safe in neighborhood	3.5	2.5	1.9	1.1	2.2

so at a young age. To clarify, relative to 8th grade, 12th graders have had four additional years in which to join a gang. However, a smaller percentage of 12th graders than 8th graders have ever belonged to a gang. This also indicates that fewer of the current 12th graders belonged to a gang four years prior, when they were in 8th grade, relative to 2003 8th graders. One caveat to this interpretation should be considered. It is also possible that, with time, the definition of a “gang” changes. That is, perhaps 6th and 8th graders hold a different interpretation of the term “gang,” such that what they consider a gang is different from how older students interpret the term. Younger students may hold a more casual view of what defines a gang, and this, in turn, may lead to overinflation of perceived gang membership by younger students.

Finally, student perceptions of the efficacy of police in catching a kid who carried a gun are quite low. The perception of police efficacy declines with increasing grade, until it levels off and actually improves somewhat in grade 12.

Attitudes and Perceptions of Violence by Gender

In every case, males hold attitudes more favorable toward violence than do females. Although few students feel it is okay to take a handgun to school, 4.5 times as many males as females find it acceptable. Males are twice as likely to feel it is okay to pick a fight, and are almost three times more likely to feel it is okay to attack someone.

Although belonging to a gang is rare, males are almost twice as likely to have reported belonging to a gang. Males also report less faith in law enforcement's ability to catch a person carrying a gun, and report feeling less safe in their neighborhoods. The most interesting gender difference is found in student reactions to being pushed by another student. Specifically, males are over 4 times more likely to push someone back who pushes them.

Figure 39

Student Attitudes and Perceptions of Issues Surrounding Violence

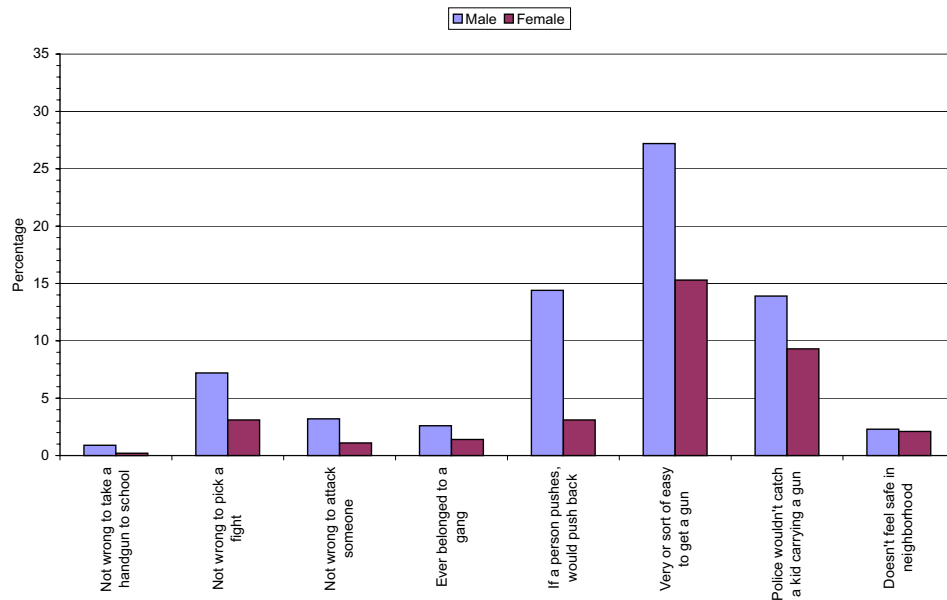


Table 33. Students Attitudes and Perceptions of Issues Surrounding Violence

Item	Male	Female	Total
Not wrong to take a handgun to school	0.9	0.2	0.6
Not wrong to pick a fight	7.2	3.1	5.4
Not wrong to attack someone	3.2	1.1	2.2
Ever belonged to a gang	2.6	1.4	2.1
If a person pushes, would you push back	14.4	3.1	9.4
Very or sort of east to get a gun	27.2	15.3	21.9
Police wouldn't catch a kid carrying a gun	13.9	9.3	11.9
Doesn't feel safe in neighborhood	2.3	2.1	2.2

It is perhaps not surprising, given the generally more tolerant attitudes held by males toward violence and anti-social behaviors, that males feel it is much easier to obtain a handgun that do females (27.2% versus 15.3%).

Altogether, differences in violent and anti-social behaviors, as well as differences in attitudes about violence, suggest that males and older students are the most likely to perform violent and anti-social behaviors, and are more likely to approve of such behaviors. However, it is also important to note that the incidence of violent and anti-social behaviors are somewhat rare, even among older male students. Less than 10% of 12th grade males have sold drugs or attacked someone. Less than 6% have been arrested, and less than 2.5% have stolen a vehicle. The most pressing issues seem to surround alcohol use and abuse. A large number of males and females, particularly older males and females, reported driving after drinking, riding with a drinking driver, or going to school drunk or high.

Gambling and Problematic Gambling

Gambling

Table 33 and Figure 40 display the data for age at which students reported having first gambled, by gender. As seen in Figure 40, most Nebraska female students have not gambled at any point in their lives, and approximately 1/3 of males have not. Of the students who have gambled, the most common age to begin is 10 or younger for both genders. Each successive year shows a decline in the number of students beginning to gamble at that age. Overall, this indicates that most students who gamble begin quite young.

Table 34 displays the data for the gambling items assessed in the survey by both grade and gender. Each question is also graphically displayed in the Figures that follow.

Beginning with the question asking students if they have gambled for money in the past year, one can see in Figure 41 that the frequency of gambling rises with

Figure 40

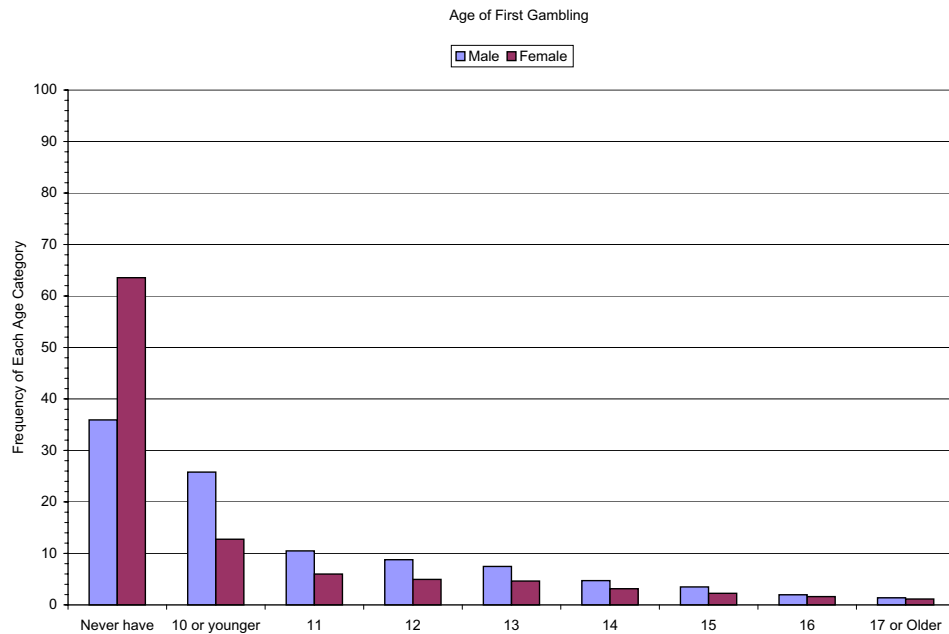


Table 34. How old were you When You First Gambled?

Responses	Male	Female	Total
Never Have	35.9	63.5	48.2
10 or Younger	25.8	12.8	20
11	10.5	6.0	8.5
12	8.8	4.9	7.1
13	7.5	4.6	6.2
14	4.7	3.1	4
15	3.5	2.3	2.9
16	2.0	1.6	1.8
17 or Older	1.4	1.1	1.3

increase in grade. Most of the gambling, however, is done by males, as males are more than twice as likely as females to report having gambled in the past year. Thirty-day gambling (Figure 42) shows the same pattern; males gamble more than females, and 30-day gambling increases with increasing grade.

These data thus indicate that, although many students begin gambling at age 10 or younger, they begin gambling more frequently at later ages. Early gambling may be an introduction to gambling, but it does not seem to increase the frequency of immediate gambling.

Table 35. Gambling Items by Grade and Gender

Responses	Grade 6	Grade 8	Grade 10	Grade 12	Male	Female
In the Past Year, Have You Gamled for Money?	21.8	33.8	36.1	37.4	45.9	19.0
In the Past 30 Days, Have You Gambled for Money?	8.9	14.5	17.3	19.1	22.9	7.1
In the Past Year, Have You Thought About or Planned to Gamble?	14.2	18.1	17.0	18.8	25.3	8.6
In the Past Year, Have You Ever Spent More than You Planned Gambling?	4.9	5.4	5.7	6.2	8.7	2.4
In the Past Year, Has Gambling Led to Lies in Your Family?	3.1	2.8	2.3	1.4	3.2	1.5

Figure 41

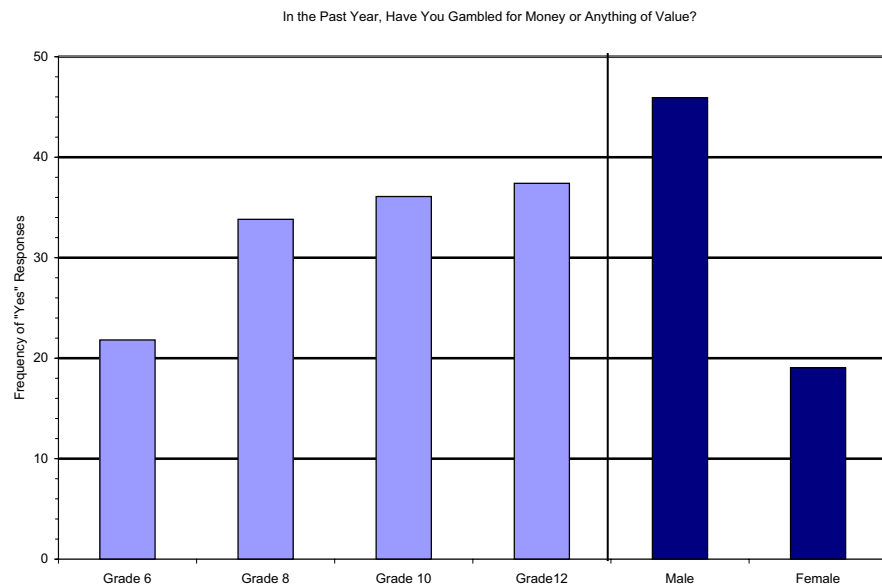
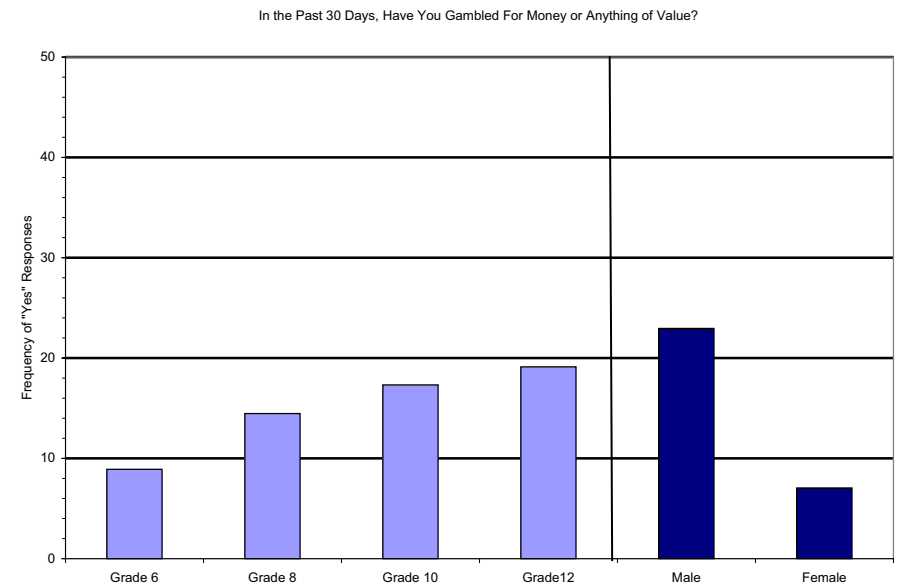


Figure 42



Problematic Gambling

Other gambling items assessed more severe issues in student gambling: preoccupation with gambling, spending more than they had meant to on gambling, and lying to their families about gambling. Figure 43 shows that 6th grade students are slightly less likely to report preoccupation with gambling, but illustrates only minor differences between 8th grade, 10th grade and 12th grade students. Again, males are more likely to report planning to gamble or thinking about gambling than are females.

As seen below in Figure 44, rates of students reporting spending more than they had planned to on gambling increases slightly with increases in grade. A bigger effect, however, is seen in the gender difference. Males are 3.5 times more likely than females to report overspending on gambling. Because overspending increases only slightly with grade, this suggests that males drive the trend.

The final gambling item assessed whether gambling had led to lies to the students’ families. As seen in Figure 45, while few students reported gambling leading to lies to their families, the frequency of gambling leading to lying decreases slightly with increasing grade. Again males are more likely to report lying to their families about gambling.

Another indicator of problematic gambling is the number of gambling items to which students responded “yes.” Therefore, students’ responses were recoded into counts for the items assessing planning to gamble, overspending due to gambling, and lying due to gambling. Increasing incidents of a “yes” response on these items are indicative of more at-risk gambling behavior.

Figure 43

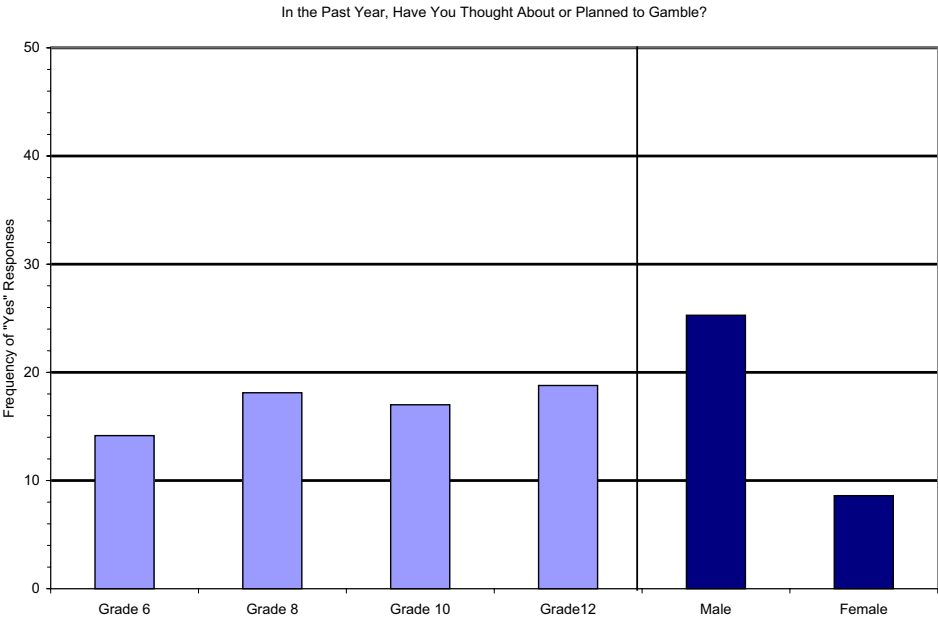


Figure 44

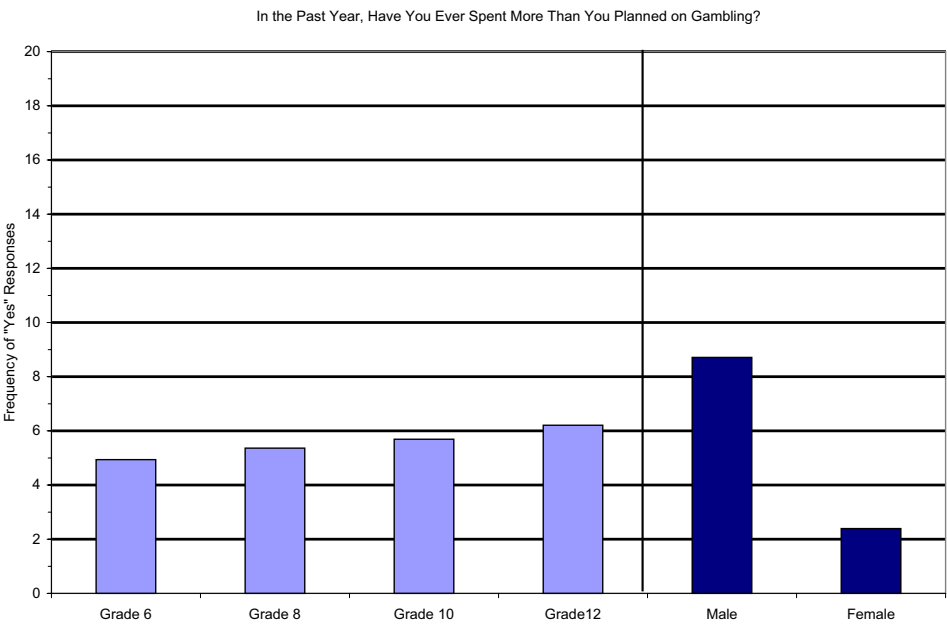
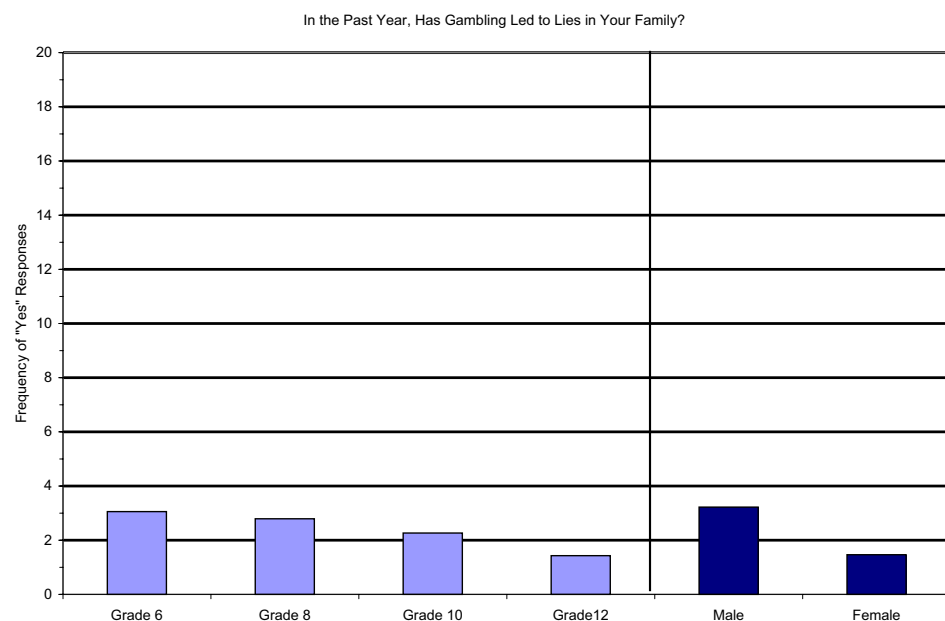


Table 35 and Figure 46 show the frequencies of “yes” responses to the aforementioned gambling items. As seen in Table 36 and Figure 46, reported rates of behaviors indicative of at-risk gambling behaviors range from 12.7% to 15.8% for a single “yes” response to 0.9% to 1.1% for “yes” responses to all three items. As expected given previous findings, males are three times more likely to respond yes to two or more items than are females.

Figure 45



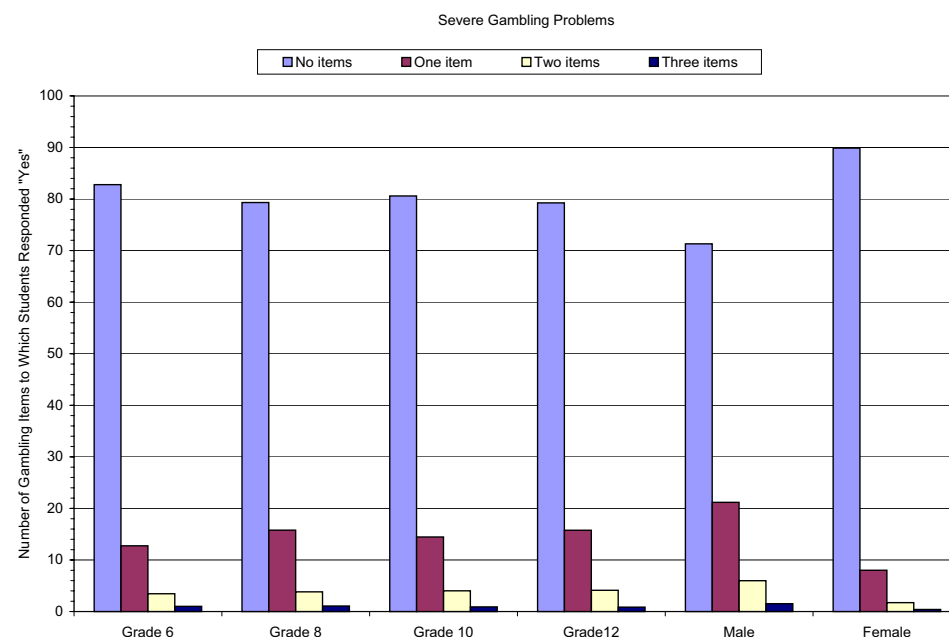
It is important to note that rates of students reporting potential for severe gambling problems (i.e. answering positively to one or more of the three problem gambling items) are virtually the same for students in 6th grade as they are for students in 8th, 10th and 12th grades. This “flatline” pattern observed in Figure 46 is not seen in any other substance use or anti-social behavior, all of which increase with increases in grade (with the exception of the previously-noted aberration in lifetime inhalant use rates). Furthermore, student-reported rates of potential for severe problem gambling behavior mirror nationally-

reported adult rates for problem gambling, and suggest that factors other than maturation (e.g. constitutional factors) may play a significant role in onset of severe problem or pathological gambling in youth as well as adults. Additional years of data collection and analysis will be required to gain additional insight and understanding into the causes and onset of this particular addictive disorder.

Table 36. Number of Students with Severe Gambling Problems

Number of Gambling Items to Which Students Responded "Yes"	Grade 6	Grade 8	Grade 10	Grade 12	Male	Female
No items	82.8	79.3	80.6	79.3	71.3	89.9
One item	12.7	15.8	14.5	15.8	21.2	8.0
Two items	3.5	3.8	4.0	4.1	6.0	1.7
Three items	1.0	1.1	0.9	0.9	1.5	0.4

Figure 46



Finally, analysis of student responses illustrates that problem gambling among youth grades 6-12 is significantly correlated with all categories of substance abuse and anti-social behaviors measured in the NRPFS survey. Tables 37 and 38 demonstrate this correlation. Table 37 shows that only 24.3% of students reporting alcohol use in the past 30 days did not endorse any at-risk gambling behavior. This trend continues throughout the substance use and anti-social items, raising concern about the relationship between gambling, substance use and anti-social behaviors in Nebraska youth.

Table 37. Responses to At-Risk Gambling Behaviors

Substance Use	No items	One item	Two Items	Three items
Alcohol Use Past 30-Days	24.3	38.3	49.3	57.3
Binge Alcohol Use	13.2	22.1	32.4	42.9
Any Drug Past 30-Days	23.9	42.8	54.6	64.4
Lifetime Any Drug	11.2	20.7	32.2	46.2

Table 38. Responses to At-Risk Gambling Behaviors

Anti-Social Behaviors	No items	One item	Two Items	Three items
Suspended	5.5	10.7	18.2	24.7
Arrested	3.0	6.5	11.7	17.0
Attack Someone	6.1	17.2	31.1	36.8
Stolen Vehicle	1.4	4.4	9.2	18.0

List of Appendices

Appendix A.....	Nebraska Risk and Protective Factor Survey
Appendix B.....	Risk and Protective Factors and Their Associated Scales
Appendix C.....	Nebraska Risk and Protective Factor Student Survey Results, Frequency and Percentage for Each Response Category
Appendix D.....	Item Construct Dictionary for the 2003 Nebraska Risk and Protective Factor Student Survey
Appendix E.....	Predictors of Cigarette, Alcohol, and Marijuana Use
Appendix F.....	Description of Profile Reports, Sample Profile Reports by Gender and State Total

Appendix A: Nebraska Risk and Protective Factor Survey

Nebraska Risk and Protective Factor Student Survey

Thank you for accepting the invitation to participate in this study. The questions contained in this booklet are designed to obtain your opinion about a number of things concerning you, your friends, your family, your neighborhood and your community. In a sense, many of your answers will count as "votes" on a wide range of important issues.

In order for this survey to be helpful, it is important that you answer each question as thoughtfully and honestly as possible. All of your answers will be kept strictly confidential, and will never be seen by anyone at your school. This study is completely voluntary, so you may skip any question you do not wish to answer.

Be sure to read the instructions below before you begin to answer. Thank you very much for being an important part of this survey.

INSTRUCTIONS

- This is not a test, so there are no right or wrong answers.
- All of the questions should be answered by marking one of the answer spaces. If you do not find an answer that fits exactly, use the one that comes closest. If any question does not apply to you, or you are not sure of what it means, just leave it blank.
- Your answers will be read automatically by a machine called an "Optical Mark Reader." Please follow these directions carefully:
 - Use a **No. 2** pencil.
 - Make heavy black marks inside the ovals.
 - Erase cleanly** any answer you wish to change.
 - Make **no other markings** on the survey pages, since they interfere with the automatic reading.
 - DO NOT** write your name anywhere on this booklet.

This kind of mark will work:

Correct Mark

Incorrect Marks

1. How old are you?
- ☐ 10 ☐ 11 ☐ 12 ☐ 13 ☐ 14
- ☐ 15 ☐ 16 ☐ 17 ☐ 18 ☐ 19 or older

2. What grade are you in?

- ☐ 6th ☐ 8th ☐ 10th ☐ 12th

3. Are you: ☐ Female ☐ Male

4. Are you Hispanic or Latino?

- ☐ Yes (Hispanic or Latino)
- ☐ No (Not Hispanic or Latino)

5. What is your race? (Select one or more)

- ☐ Black or African American
- ☐ Asian
- ☐ American Indian
- ☐ Native Hawaiian or Other Pacific Islander
- ☐ Alaska Native
- ☐ White
- ☐ Other (Please specify) _____

6. Where are you living now?

- ☐ On a farm or a ranch
- ☐ In the country, not on a farm or ranch
- ☐ In a city, town, or suburb
- ☐ On a reservation

7. In my school, students have lots of chances to help decide things like class activities and rules.

- ☐ NO! ☐ no ☐ yes ☐ YES!

8. Teachers ask me to work on special classroom projects.

- ☐ NO! ☐ no ☐ yes ☐ YES!

9. There are a lot of chances for students in my school to get involved in sports, clubs, and other school activities outside of class.

- ☐ NO! ☐ no ☐ yes ☐ YES!

10. There are lots of chances for students in my school to talk with a teacher one-on-one.

- ☐ NO! ☐ no ☐ yes ☐ YES!

11. I have lots of chances to be part of class discussions or activities.

- ☐ NO! ☐ no ☐ yes ☐ YES!

12. How often do you feel that the schoolwork you are assigned is meaningful and important?

- ☐ Never ☐ Seldom ☐ Sometimes ☐ Often ☐ Almost Always

13. How interesting are most of your courses to you?

- ☐ Very interesting and stimulating ☐ Fairly interesting ☐ Very Dull
- ☐ Quite interesting ☐ Slightly dull

14. How important do you think the things you are learning in school are going to be for your later life?

- ☐ Very important ☐ Fairly important ☐ Not at all important
- ☐ Quite important ☐ Slightly important

15. Now thinking back over the past year in school, how often did you:

- a. enjoy being in school?
- b. hate being in school?
- c. try to do your best work in school?

Almost always				
Often				
Sometimes				
Seldom				
Never				
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

HEALTH & SAFETY

16. How old were you when you first:

17 or Older				
16				
15				
14				
13				
12				
11				
10 or Younger				
Never Have				
a. smoked marijuana?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. smoked a cigarette, even just a puff?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. had more than a sip or two of beer, wine, or hard liquor (for example vodka, whiskey, or gin)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. began drinking alcoholic beverages regularly that is, at least once or twice a month?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. used "meth" (also known as 'crank', 'crystal', or 'ice')?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. got suspended from school?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. got arrested?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h. carried a handgun?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i. attacked someone with the idea of seriously hurting them?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
j. belonged to a gang?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

17. How wrong do you think it is for someone your age to:

Not Wrong at All				
A Little Bit Wrong				
Wrong				
Very Wrong				
a. take a handgun to school?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. steal anything worth more than \$5.00?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. pick a fight with someone?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. attack someone with the idea of seriously hurting them?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. stay away from school all day when their parents think they are at school?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. drink beer, wine, or hard liquor (for example, vodka, whiskey, or gin) regularly (at least once or twice a month)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. smoke cigarettes?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h. smoke marijuana?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i. use "meth" (also known as 'crank', 'crystal', or 'ice')?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
j. use LSD, cocaine, or another illegal drug?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

18. It is all right to beat up people if they start the fight.
☐ NO! ☐ no ☐ yes ☐ YES!

19. It is important to be honest with your parents, even if they become upset or you get punished.
☐ NO! ☐ no ☐ yes ☐ YES!

20. I think it is okay to take something without asking, if you can get away with it.
☐ NO! ☐ no ☐ yes ☐ YES!

21. Have you ever belonged to a gang?
☐ NO! ☐ no ☐ yes ☐ YES!

22. If you have ever belonged to a gang, did the gang have a name?
☐ Yes ☐ No ☐ I never have belonged to a gang

23. How many times in the past year (the last 12 months) have you:

	40+ Times	30 to 39 Times	20 to 29 Times	10 to 19 Times	6 to 9 Times	3 to 5 Times	1 to 2 Times	Never
a. been suspended from school?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. carried a handgun?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. sold illegal drugs?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. stolen or tried to steal a motor vehicle such as a car or a motorcycle?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. been arrested?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. attacked someone with the idea of seriously hurting them?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. been drunk or high at school?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h. taken a handgun to school?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

24. You are looking at CD's in the music store with a friend. You look up and see her slip a CD under her coat. She smiles and says, "Which one do you want? Go ahead, take it while nobody's around."
There is no one in sight, no employees or other customers. What would you do now?
☐ Ignore her
☐ Grab a CD and leave the store
☐ Tell her to put the CD back
☐ Act like it is a joke, and ask her to put the CD back

25. It is 8:00 on a weeknight and you are about to go over to a friend's house when your mother asks you where you are going. You say "Oh, just going to go hang out with some friends. She says, "NO, you'll just get into trouble if you go out. Stay home tonight." What would you do now?
☐ Leave the house anyway
☐ Explain what you are going to do with your friends, tell her when you will get home, and ask if you can go out
☐ Not say anything and start watching TV
☐ Get into an argument with her

26. You are visiting another part of town, and you do not know any of the people your age there. You are walking down the street, and some teenager you do not know is walking toward you. He is about your size, and as he is about to pass you, he deliberately bumps into you and you almost lose your balance. What would you say or do?

☐ Push the person back
☐ Say "Excuse me" and keep on walking
☐ Say "Watch where you're going" and keep on walking
☐ Swear at the person and walk away

27. You are at a party at someone's house, and one of your friends offers you a drink containing alcohol. What would you say or do?

☐ Drink it
☐ Tell your friend, "No thanks, I don't drink" and suggest that you and your friend go and do something else
☐ Just say, "No thanks" and walk away
☐ Make up a good excuse, tell your friend you had something else to do, and leave

28. I think sometimes it is okay to cheat at school.

☐ NO! ☐ no ☐ yes ☐ YES!

29. How much do you think people risk harming themselves (physically or in other ways) if they:

	Great risk	Moderate risk	Slight risk	No risk
a. Smoke one or more packs of cigarettes per day?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Try marijuana once or twice?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Smoke marijuana regularly?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Take one or two drinks of an alcohol beverage (beer, wine, liquor) nearly every day?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Use "meth" (also known as 'crank', 'crystal', or 'ice')?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

30. How many people your age do you think ...

	All or almost all of them	More than half of them	About half of them	Less than half of them	None of them
a. Smoke cigarettes?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Drink alcohol?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Smoke marijuana?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Use "meth" (also known as 'crank', 'crystal', or 'ice')?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

GAMBLING

31. How old were you the first time you gambled (bet money or something of value on sports, a game of chance or skill, played the lottery, or bet cards or dice games)?

17 or Older	<input type="checkbox"/>
16	<input type="checkbox"/>
15	<input type="checkbox"/>
14	<input type="checkbox"/>
13	<input type="checkbox"/>
12	<input type="checkbox"/>
11	<input type="checkbox"/>
10 or Younger	<input type="checkbox"/>
Never Have	<input type="checkbox"/>

32. In the past year, have you gambled for money or anything of value?
☐ Yes ☐ No

33. In the last 30 days, have you gambled for money or anything of value?
☐ Yes ☐ No

34. In the past year, have you often found yourself thinking about gambling or planning to gamble?
☐ Yes ☐ No

35. In the past year, have you ever spent more than you meant to on gambling?
☐ Yes ☐ No

36. In the past year, has your gambling ever led to lies to your family?
☐ Yes ☐ No

DRUG/ALCOHOL USAGE

37. Have you ever used smokeless tobacco (chew, snuff, plug, dipping tobacco, or chewing tobacco)?

- ☐ Never ☐ Regularly in the past
☐ Once or twice ☐ Regularly now
☐ Once in a while but not regularly

38. How frequently have you used smokeless tobacco during the past 30 days?

- ☐ Never ☐ About once a day
☐ Once or twice ☐ More than once a day
☐ Once or twice a week

39. Have you ever smoked cigarettes?

- ☐ Never ☐ Regularly in the past
☐ Once or twice ☐ Regularly now
☐ Once in a while but not regularly

40. How frequently have you smoked cigarettes during the past 30 days?

- ☐ Not at all
☐ Less than one cigarette per day
☐ One to five cigarettes per day
☐ About one-half pack per day
☐ About one pack per day
☐ About one and one-half packs per day
☐ Two packs or more per day

41. On how many occasions have you had beer, wine, or hard liquor to drink in your lifetime (more than just a few sips)?

- ☐ 0 - occasions ☐ 10 - 19 occasions
☐ 1 - 2 occasions ☐ 20 - 39 occasions
☐ 3 - 5 occasions ☐ 40 or more occasions
☐ 6 - 9 occasions

42. On how many occasions (if any) have you had beer, wine, or hard liquor during the past 30 days?

- ☐ 0 - occasions ☐ 10 - 19 occasions
☐ 1 - 2 occasions ☐ 20 - 39 occasions
☐ 3 - 5 occasions ☐ 40 or more occasions
☐ 6 - 9 occasions

43. Think back over the last two weeks. How many times have you had five or more alcoholic drinks in a row?

- ☐ None ☐ 3 - 5 times
☐ 1 time ☐ 6 - 9 times
☐ 2 times ☐ 10 or more times

44. On how many occasions (if any) have you used marijuana in your lifetime?

- ☐ 0 - occasions ☐ 10 - 19 occasions
☐ 1 - 2 occasions ☐ 20 - 39 occasions
☐ 3 - 5 occasions ☐ 40 or more occasions
☐ 6 - 9 occasions

45. On how many occasions (if any) have you used marijuana during the past 30 days?

- ☐ 0 - occasions ☐ 10 - 19 occasions
☐ 1 - 2 occasions ☐ 20 - 39 occasions
☐ 3 - 5 occasions ☐ 40 or more occasions
☐ 6 - 9 occasions

46. On how many occasions (if any) have you used LSD or other psychedelics in your lifetime?

- ☐ 0 - occasions ☐ 10 - 19 occasions
☐ 1 - 2 occasions ☐ 20 - 39 occasions
☐ 3 - 5 occasions ☐ 40 or more occasions
☐ 6 - 9 occasions

47. On how many occasions (if any) have you used LSD or other psychedelics during the past 30 days?

- ☐ 0 - occasions ☐ 10 - 19 occasions
☐ 1 - 2 occasions ☐ 20 - 39 occasions
☐ 3 - 5 occasions ☐ 40 or more occasions
☐ 6 - 9 occasions

48. On how many occasions (if any) have you used cocaine or crack in your lifetime?

- ☐ 0 - occasions ☐ 10 - 19 occasions
☐ 1 - 2 occasions ☐ 20 - 39 occasions
☐ 3 - 5 occasions ☐ 40 or more occasions
☐ 6 - 9 occasions

49. On how many occasions (if any) have you used cocaine or crack during the past 30 days?

- ☐ 0 - occasions ☐ 10 - 19 occasions
☐ 1 - 2 occasions ☐ 20 - 39 occasions
☐ 3 - 5 occasions ☐ 40 or more occasions
☐ 6 - 9 occasions

50. On how many occasions (if any) have you sniffed glue, breathed the contents of an aerosol spray can, or inhaled other gases or sprays in order to get high in your lifetime?
- ☐ 0 - occasions ☐ 10 - 19 occasions
☐ 1 - 2 occasions ☐ 20 - 39 occasions
☐ 3 - 5 occasions ☐ 40 or more occasions
☐ 6 - 9 occasions

51. On how many occasions (if any) have you sniffed glue, breathed the contents of an aerosol spray can, or inhaled other gases or sprays in order to get high during the past 30 days?
- ☐ 0 - occasions ☐ 10 - 19 occasions
☐ 1 - 2 occasions ☐ 20 - 39 occasions
☐ 3 - 5 occasions ☐ 40 or more occasions
☐ 6 - 9 occasions

52. On how many occasions (if any) have you taken "meth" (also known as 'crank', 'crystal', or 'ice') in your lifetime?
- ☐ 0 - occasions ☐ 10 - 19 occasions
☐ 1 - 2 occasions ☐ 20 - 39 occasions
☐ 3 - 5 occasions ☐ 40 or more occasions
☐ 6 - 9 occasions

53. On how many occasions (if any) have you taken "meth" (also known as 'crank', 'crystal', or 'ice') in the past 30 days?
- ☐ 0 - occasions ☐ 10 - 19 occasions
☐ 1 - 2 occasions ☐ 20 - 39 occasions
☐ 3 - 5 occasions ☐ 40 or more occasions
☐ 6 - 9 occasions

54. On how many occasions (if any) have you used detrisol in your lifetime?
- ☐ 0 - occasions ☐ 10 - 19 occasions
☐ 1 - 2 occasions ☐ 20 - 39 occasions
☐ 3 - 5 occasions ☐ 40 or more occasions
☐ 6 - 9 occasions

55. On how many occasions (if any) have you used detrisol during the past 30 days?
- ☐ 0 - occasions ☐ 10 - 19 occasions
☐ 1 - 2 occasions ☐ 20 - 39 occasions
☐ 3 - 5 occasions ☐ 40 or more occasions
☐ 6 - 9 occasions

56. On how many occasions (if any) have you used other illegal drugs in your lifetime?
- ☐ 0 - occasions ☐ 10 - 19 occasions
☐ 1 - 2 occasions ☐ 20 - 39 occasions
☐ 3 - 5 occasions ☐ 40 or more occasions
☐ 6 - 9 occasions

57. On how many occasions (if any) have you used other illegal drugs during the past 30 days?
- ☐ 0 - occasions ☐ 10 - 19 occasions
☐ 1 - 2 occasions ☐ 20 - 39 occasions
☐ 3 - 5 occasions ☐ 40 or more occasions
☐ 6 - 9 occasions

58. During the past year, how many times (if any) have you driven a car, truck or motorcycle after drinking alcohol?
- ☐ 0 - occasions ☐ 10 - 19 occasions
☐ 1 - 2 occasions ☐ 20 - 39 occasions
☐ 3 - 5 occasions ☐ 40 or more occasions
☐ 6 - 9 occasions

59. During the past year, how many times (if any) have you been a passenger in a car or truck, or on a motorcycle, driven by someone after they had been drinking alcohol?
- ☐ 0 - occasions ☐ 10 - 19 occasions
☐ 1 - 2 occasions ☐ 20 - 39 occasions
☐ 3 - 5 occasions ☐ 40 or more occasions
☐ 6 - 9 occasions

60. If you drank alcohol (not just a sip or a taste) in the past year, think about the last time you did so. How did you get the alcoholic beverage? (Check YES or NO for each. If you did not drink alcohol in the past year, check DID NOT USE for each one).

The last time I drank alcohol . . .	Yes	No	DID NOT USE
a. I bought it myself with a fake ID	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. I bought it myself without a fake ID	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. I got it from someone I know aged 21 or older	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. I got it from someone I know under age 21	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. I got it from a brother or sister	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. I got it from home <u>with</u> my parents' permission	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. I got it from home without my parents' permission	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h. I got it from another relative	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i. A stranger bought it for me	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
j. I took it from a store or shop	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
k. Other	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

61. And at the time you last drank alcohol in the past year, where were you when you drank? (Check YES or NO for each. If you did not drink alcohol in the past year, check DID NOT USE for each one).

On the last day I had alcohol, I drank . . .	Yes	No	DID NOT USE
a. at my home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. at someone else's home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. at an open area like a park, beach, back road, or a street corner	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. at a sporting event or concert	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. at a restaurant, bar or a nightclub	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. at an empty building or a construction site	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. at a hotel/motel	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h. in a car	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

62. On the last day you had alcohol, were there one or more adults present?
- ☐ Yes ☐ No ☐ Never Used

PLEASE DO NOT WRITE IN THIS AREA

Appendix B: Risk and Protective Factors and Their Associated Scales

This section lists the risk and protective factors of the NRPFSS as well as the associated survey scales. Factors not assessed in the Nebraska survey are shaded in light grey. Factors without associated scales are also shaded in light grey, and “no scale” is noted next to the factor. Those evaluating prevention programs may want to investigate all scales that have been developed to measure areas of risk and protection.

Appendix B (Cont.): Risk and Protective Factors and Their Associated Scales

Community Domain Protective Factors

Protective Factor

Associated Scales

Community Opportunities for
Prosocial Involvement

Community Opportunities for
Prosocial Involvement

Community Rewards for Prosocial
Involvement

Community Rewards for Prosocial
Involvement

Community Domain Risk Factors

Risk Factor

Associated Scales

Low Neighborhood Attachment

Low Neighborhood Attachment Community
Disorganization

Community Disorganization

Low Neighborhood Attachment Community
Disorganization

Transitions & Mobility

Transitions & Mobility

Laws and Norms Favorable to Drug
Use, Firearms, and Crime

Laws and Norms Favorable to Drug
Use

Availability of Drugs and Firearms

Perceived Availability of Drugs
Perceived Availability of Handguns

Media Portrayals of Violence

No Scale

Extreme Economic Deprivation

No Scale

Family Domain Protective Factors

Protective Factor

Associated Scales

Family Attachment
(Nebraska used its own items)

Family Attachment
(questions 86 and 87)

Family Opportunities for Positive
Involvement

Family Opportunities for Positive
Involvement

Family Rewards for Positive
Involvement

Family Rewards for Positive
Involvement

Family Domain Risk Factors

Risk Factor

Associated Scales

Family Management Problems

Poor Family Management

Family Conflict

Family Conflict

Family Involvement in the Problem
Behavior

Family History of Antisocial
Behavior

Favorable Parental Attitudes Towards
The Problem Behavior

Parental Attitudes Favorable to
Antisocial Behavior
Parental Attitudes Favorable to
Drug Use

School Domain Protective Factors

Protective Factor

Associated Scales

School Opportunities for Prosocial
Involvement

School Opportunities for
Prosocial Involvement

School Rewards for Prosocial
Involvement

School Rewards for Prosocial
Involvement

School Domain Risk Factors

Risk Factor

Associated Scales

Academic Failure Beginning in Late
Elementary School

Academic Failure

Lack of Commitment to School

Low School Commitment

Individual-Peer Protective Factors

Protective Factor

Associated Scales

Religiosity

Religiosity

Social Skills

Social Skills

Belief in the Moral Order

Belief in the Moral Order

Individual-Peer Risk Factors

Risk Factor

Associated Scales

Rebelliousness

Rebelliousness

Friends Who Engage in the Problem Behavior

Interaction with Antisocial Peers
Friends' Use of Drugs
Rewards for Antisocial Behavior

Gang Involvement
(Included in Altered Form)

Gang Involvement
(Included in Altered Form)

Favorable Attitudes Towards the Problem
Behavior

Attitudes Favorable Towards Antisocial
Behavior
Attitudes Favorable Towards Drug Use
Perceived Risks of Drug Use
Intention to Use

Early Initiative of the Problem Behavior

Early Initiative of Drug Use
Early Initiative of Antisocial Behavior

Constitutional Factors

Sensation Seeking
Depressive Symptoms

Appendix C: Nebraska Risk and Protective Factor Student Survey Results, Frequency and Percentage for Each Response Category

This section contains the number and percentage of students selecting each response category for each question on the Nebraska Risk and Protective Factor Student Survey.

Question Number	Question	Response Options	Count (N)	Percentage (%)
1.	How old are you?	10 11 12 13 14 15 16 17 18 19 or older	28 3565 1765 4366 2358 3869 2095 3465 1758 74	0.1 15.3 7.6 18.7 10.1 16.6 9.0 14.8 7.5 0.3
2.	What grade are you in?	6th 8th 10th 12th	6082 7185 6646 6028	23.4 27.7 25.6 23.2
3.	Are you:	Male Female	13195 10566	55.5 44.5
4.	Are you Hispanic or Latino?	Yes (Hispanic or Latino) No (Not Hispanic or Latino)	2417 23239	9.4 90.6
5.	What is your race? (Select one or more) Black or African American Asian American Indian Native Hawaiian or Other Pacific Islander Alaska Native White Other (Please specify)	Yes Yes Yes Yes Yes Yes Yes Yes	512 373 1133 158 143 22794 2034	1.9 1.4 4.3 0.6 0.5 86.0 7.7
6.	Where are you living now?	On a farm or a ranch In the country, not on a farm or ranch In a city, town, or suburb On a reservation	3661 3038 19355 285	13.9 11.5 73.5 1.1
7.	In my school, students have lots of chances to help decide things like class activities and rules	NO! no yes YES!	3313 8011 12107 2814	12.6 30.5 46.1 10.7
8.	Teachers ask me to work on special classroom projects.	NO! no yes YES!	2578 9328 11343 2897	9.9 35.7 43.4 11.1
9.	There are lots of chances for	NO!	465	1.8

Question Number	Question	Response Options	Count (N)	Percentage (%)
	students in my school to get involved in sports, clubs, and other school activities outside of class.	no yes YES!	1053 7811 17015	4.0 29.7 64.6
10.	There are lots of chances for students in my school to talk with a teacher one-on-one.	NO! no yes YES!	683 2689 12385 10564	2.6 10.2 47.1 40.1
11.	I have lots of chances to be part of class discussions or activities.	NO! no yes YES!	576 1872 12647 11226	2.2 7.1 48.0 42.7
12.	How often do you feel that the schoolwork you are assigned is meaningful and important?	Never Seldom Sometimes Often Almost Always	1106 3178 9494 7511 4804	4.2 12.2 36.4 28.8 18.4
13.	How interesting are most of your courses to you?	Very interesting and stimulating Quite interesting Fairly interesting Slightly Dull Very Dull	1569 5886 11790 4673 1712	6.1 23.0 46.0 18.2 6.7
14.	How important do you think the things you are learning in school are going to be for your later life?	Very important Quite important Fairly important Slightly important Not at all important	8779 6536 6578 3370 708	33.8 25.2 25.3 13.0 2.7
15. a.	Now thinking back over the past year in school, how often did you: enjoy being in school?	Never Seldom Sometimes Often Almost Always	1460 3501 9131 7282 3862	5.8 13.9 36.2 28.9 15.3
b.	hate being in school?	Never Seldom Sometimes	2704 7505 8363	10.8 30.0 33.4

Question Number	Question	Response Options	Count (N)	Percentage (%)
c.	try to do your best work in school?	Often	4433	17.7
		Almost Always	2014	8.0
		Never	262	1.0
		Seldom	919	3.7
		Sometimes	3950	15.8
		Often	7863	31.4
		Almost Always	12067	48.2
16. a.	How old were you when you first: smoked marijuana?	Never have	21124	82.6
		10 or younger	297	1.2
		11	307	1.2
		12	431	1.7
		13	702	2.7
		14	862	3.4
		15	926	3.6
		16	610	2.4
		17 or Older	313	1.2
b.	smoked a cigarette, even just a puff?	Never have	16657	65.3
		10 or younger	2264	8.9
		11	1178	4.6
		12	1208	4.7
		13	1225	4.8
		14	1096	4.3
		15	956	3.7
		16	594	2.3
		17 or Older	331	1.3
c.	had more than a sip or two of beer, wine, or hard liquor (for example vodka, whiskey, or gin?)	Never have	11421	45.0
		10 or younger	3023	11.9
		11	1542	6.1
		12	1679	6.6
		13	2172	8.6
		14	2065	8.1
		15	1904	7.5
		16	1085	4.3
		17 or Older	500	2.0
d.	began drinking alcoholic beverages regularly that is, at least once or twice a month?	Never have	19193	75.6
		10 or younger	213	0.8
		11	186	0.7
		12	337	1.3
		13	716	2.8
		14	1100	4.3
		15	1617	6.4
		16	1296	5.1
		17 or Older	736	2.9

Question Number	Question	Response Options	Count (N)	Percentage (%)
e.	used "meth" (also known as 'crank,' crystal,' or 'ice')?	Never have 10 or younger 11 12 13 14 15 16 17 or Older	24344 89 41 30 63 99 135 150 95	97.2 0.4 0.2 0.1 0.3 0.4 0.5 0.6 0.4
f.	got suspended from school?	Never have 10 or younger 11 12 13 14 15 16 17 or Older	21999 715 365 455 552 380 289 182 80	87.9 2.9 1.5 1.8 2.2 1.5 1.2 0.7 0.3
g.	got arrested?	Never have 10 or younger 11 12 13 14 15 16 17 or Older	23609 182 134 162 205 167 201 202 134	94.5 0.7 0.5 0.6 0.8 0.7 0.8 0.8 0.5
h.	carried a handgun?	Never have 10 or younger 11 12 13 14 15 16 17 or Older	22926 481 302 249 215 137 122 115 81	93.1 2.0 1.2 1.0 0.9 0.6 0.5 0.5 0.3
i.	attacked someone with the idea of seriously hurting them?	Never have 10 or younger 11 12 13 14 15 16 17 or Older	22409 746 414 372 435 325 276 182 102	88.7 3.0 1.6 1.5 1.7 1.3 1.1 0.7 0.4
j.	belonged to a gang?	Never have	23320	95.5

Question Number	Question	Response Options	Count (N)	Percentage (%)
17.	How wrong do you think it is for someone your age to: take a handgun to school?	10 or younger	276	1.1
		11	219	0.9
		12	152	0.6
		13	178	0.7
		14	103	0.4
		15	74	0.3
17.	How wrong do you think it is for someone your age to: steal anything worth more than \$5.00?	16	43	0.2
		17 or Older	42	0.2
		Very Wrong	22233	91.1
		Wrong	1673	6.9
		A Little Bit Wrong	359	1.5
		Not Wrong at All	131	0.5
b.	steal anything worth more than \$5.00?	Very Wrong	12666	52.6
c.	pick a fight with someone?	Wrong	8859	36.8
		A Little Bit Wrong	2167	9.0
		Not Wrong at All	402	1.7
		Very Wrong	7633	31.9
		Wrong	9353	39.1
		A Little Bit Wrong	5711	23.9
d.	attack someone with the idea of seriously hurting them?	Not Wrong at All	1229	5.1
		Very Wrong	16243	68.8
		Wrong	5291	22.4
		A Little Bit Wrong	1572	6.7
		Not Wrong at All	493	2.1
		Very Wrong	12043	50.7
e.	stay away from school all day when their parents think they are at school?	Very Wrong	12043	50.7
f.	drink beer, wine, or hard liquor (for example, vodka, whiskey, or gin) regularly (at least once or twice a month)?	Wrong	7546	31.7
		A Little Bit Wrong	3284	13.8
		Not Wrong at All	899	3.8
		Very Wrong	11786	49.8
		Wrong	5112	21.6
		A Little Bit Wrong	4312	18.2
g.	smoke cigarettes?	Not Wrong at All	2472	10.4
		Very Wrong	13775	58.5
		Wrong	4878	20.7
		A Little Bit Wrong	2886	12.3
		Not Wrong at All	2005	8.5
		Very Wrong	17225	74.2
h.	smoke marijuana?	Very Wrong	17225	74.2

Question Number	Question	Response Options	Count (N)	Percentage (%)
i.	use "meth" (also known as 'crank,' 'crystal,' or 'ice')?	Wrong	3036	13.1
		A Little Bit Wrong	1549	6.7
		Not Wrong at All	1418	6.1
j.	use LSD, cocaine, or another illegal drug?	Very Wrong	21934	91.7
		Wrong	1319	5.5
		A Little Bit Wrong	394	1.6
		Not Wrong at All	262	1.1
18.	It is all right to beat up people if they start the fight.	Very Wrong	20408	89.5
		Wrong	1651	7.2
		A Little Bit Wrong	405	1.8
		Not Wrong at All	342	1.5
19.	It is important to be honest with your parents, even if they become upset or you get punished.	NO!	6398	24.3
		no	8536	32.5
		yes	6886	26.2
		YES!	4457	17.0
20.	I think it is okay to take something without asking, if you can get away with it.	NO!	553	2.1
		no	1933	7.3
		yes	10727	40.7
		YES!	13123	49.8
21.	Have you ever belonged to a gang?	NO!	12631	48.1
		no	10816	41.2
		yes	2262	8.6
		YES!	575	2.2
22.	If you have ever belonged to a gang, did the gang have a name?	NO!	21521	81.9
		no	3373	12.8
		yes	844	3.2
		YES!	538	2.0
23.	How many times in the past year (the last 12 months) have you been suspended from school?	Yes	1176	4.5
		No	714	2.7
		I have never belonged to a gang	24252	92.8
a.		Never	24476	93.2
		1 or 2 Times	1379	5.3
		3 to 5 Times	232	0.9
		6 to 9 Times	81	0.3
		10 to 19 Times	35	0.1

Question Number	Question	Response Options	Count (N)	Percentage (%)
b.	carried a handgun?	20 to 29 Times	16	0.1
		30 to 39 Times	5	0.0
		40+ Times	37	0.1
		Never	24617	94.2
		1 or 2 Times	694	2.7
d.	stolen or tried to steal a motor vehicle such as a car or a motorcycle?	3 to 5 Times	297	1.1
		6 to 9 Times	130	0.5
		10 to 19 Times	121	0.5
		20 to 29 Times	60	0.2
		30 to 39 Times	34	0.1
c.	sold illegal drugs?	40+ Times	189	0.7
		Never	25142	96.2
		1 or 2 Times	379	1.5
		3 to 5 Times	181	0.7
		6 to 9 Times	85	0.3
e.	been arrested?	10 to 19 Times	91	0.3
		20 to 29 Times	60	0.2
		30 to 39 Times	25	0.1
		40+ Times	167	0.6
		Never	25142	96.2
f.	attacked someone with the idea of seriously hurting them?	1 or 2 Times	379	1.5
		3 to 5 Times	181	0.7
		6 to 9 Times	85	0.3
		10 to 19 Times	91	0.3
		20 to 29 Times	60	0.2
g.	been drunk or high at school?	30 to 39 Times	25	0.1
		40+ Times	167	0.6
		Never	25142	96.2
		1 or 2 Times	379	1.5
		3 to 5 Times	181	0.7
h.	carried a handgun?	6 to 9 Times	85	0.3
		10 to 19 Times	91	0.3
		20 to 29 Times	60	0.2
		30 to 39 Times	25	0.1
		40+ Times	167	0.6
i.	stolen or tried to steal a motor vehicle such as a car or a motorcycle?	Never	25570	97.7
		1 or 2 Times	400	1.5
		3 to 5 Times	80	0.3
		6 to 9 Times	34	0.1
		10 to 19 Times	21	0.1
j.	attacked someone with the idea of seriously hurting them?	20 to 29 Times	9	0.0
		30 to 39 Times	5	0.0
		40+ Times	51	0.2
		Never	25092	96.1
		1 or 2 Times	778	3.0
k.	been arrested?	3 to 5 Times	121	0.5
		6 to 9 Times	42	0.2
		10 to 19 Times	15	0.1
		20 to 29 Times	9	0.0
		30 to 39 Times	1	0.0
l.	attacked someone with the idea of seriously hurting them?	40+ Times	57	0.2
		Never	23673	91.1
		1 or 2 Times	1405	5.4
		3 to 5 Times	435	1.7
		6 to 9 Times	200	0.8
m.	been drunk or high at school?	10 to 19 Times	86	0.3
		20 to 29 Times	46	0.2
		30 to 39 Times	19	0.1
		40+ Times	110	0.4
		Never	23829	91.1
n.	been drunk or high at school?	1 or 2 Times	1075	4.1

Question Number	Question	Response Options	Count (N)	Percentage (%)
h.	taken a handgun to school?	3 to 5 Times	404	1.5
		6 to 9 Times	220	0.8
		10 to 19 Times	183	0.7
		20 to 29 Times	100	0.4
		30 to 39 Times	47	0.2
		40+ Times	303	1.2
24.	You are looking at CD's in the music store with a friend. You look up and see her slip a CD under her coat. She smiles and says, "Which one do you want? Go ahead, take it while nobody's around." There is not one in sight, no employees or other customers. What would you do now?	Never	26021	99.5
		1 or 2 Times	50	0.2
		3 to 5 Times	6	0.0
		6 to 9 Times	8	0.0
		10 to 19 Times	6	0.0
		20 to 29 Times	6	0.0
25.	It is 8:00 on a weeknight and you are about to go over to a friend's house when your mother asks you where you are going. You say "Oh, just going to hang out with some friends. She says, "NO, you'll just get into trouble if you go out. Stay home tonight." What would you do now?	30 to 39 Times	0	0.0
		40+ Times	44	0.2
		Ignore her	4671	17.8
		Grab a CD and leave the store	1795	6.9
		Tell her to put the CD back	11960	45.7
		Act like it's a joke, and ask her to put the CD back	7763	29.6
26.	You are visiting another part of town, and you do not know any of the people your age there. You are	Leave the house anyway	1554	6.1
		Explain what you are going to do with your friends, tell her when you will get home, and ask if you can go out	18971	74.0
		Not say anything and start watching TV	2789	10.9
		Get into an argument with her	2339	9.1
		Push the person back	2268	8.7

Question Number	Question	Response Options	Count (N)	Percentage (%)
	walking down the street, and some teenager you do not know is walking toward you. He is about your size, and as he is about to pass you, he deliberately bumps into you and you almost lose your balance. What would you say or do?	Say "Excuse me" and keep on walking Say "Watch where you're going" and keep on walking Swear at the person and walk away	14047 6483 3281	53.9 24.9 12.6
27.	You are at a party at someone's house, and one of your friends offers you a drink containing alcohol. What would you say or do?	Drink it Tell your friend, "No thanks. I don't drink" and suggest that you and your friend go and do something else Just say, "No thanks" and walk away Make up a good excuse, tell your friend you had something else to do, and leave	7332 7665 7794 3030	28.4 29.7 30.2 11.7
28.	I think sometimes it is okay to cheat at school.	NO! no yes YES!	9606 8622 6688 1388	36.5 32.8 25.4 5.3
29.	How much do you think people risk harming themselves (physically or in other ways) if they:			
a.	Smoke one or more packs of cigarettes per day?	No risk Slight risk Moderate risk Great risk	876 1603 5570 18112	3.3 6.1 21.3 69.2
b.	Try marijuana once or twice?	No risk Slight risk Moderate risk Great risk	3779 6105 6806 9397	14.5 23.4 26.1 36.0

Question Number	Question	Response Options	Count (N)	Percentage (%)
c.	Smoke marijuana regularly?	No risk Slight risk Moderate risk Great risk	1424 1909 3759 18613	5.5 7.4 14.6 72.4
d.	Take one or two drinks of an alcohol beverage (beer, wine, liquor) nearly every day?	No risk Slight risk Moderate risk Great risk	2769 5820 7670 9574	10.7 22.5 29.7 37.1
e.	Use "meth" (also known as 'crank,' crystal,' or 'ice)?	No risk Slight risk Moderate risk Great risk	865 432 1511 23169	3.3 1.7 5.8 89.2
30.	How many people your age do you think...			
a.	Smoke cigarettes?	None of them Less than half of them About half of them More than half of them All or almost all of them	4005 9977 6991 4272 888	15.3 38.2 26.8 16.3 3.4
b.	Drink alcohol?	None of them Less than half of them About half of them More than half of them All or almost all of them	3837 6042 5386 7494 3321	14.7 23.2 20.7 28.7 12.7
c.	Smoke marijuana?	None of them Less than half of them About half of them More than half of them All or almost all of them	7619 10881 4084 2579 826	29.3 41.9 15.7 9.9 3.2
d.	Use "meth" (also known as 'crank,' 'crystal,' or 'ice)?	None of them Less than half of them About half of them More than half of them All or almost all of them	13231 10493 1341 578 254	51.1 40.5 5.2 2.2 1.0
31.	How old were you the first time you gambled (bet money or something of value on sports, a game of chance or skill, played the lottery, or bet cards or dice games)?	Never have	11925	49.9

Question Number	Question	Response Options	Count (N)	Percentage (%)
32.	In the past year, have you gambled for money or anything of value?	10 or younger	4616	19.3
		11	1973	8.3
		12	1648	6.9
		13	1423	6.0
		14	919	3.8
		15	670	2.8
		16	411	1.7
33.	In the past year, have you gambled for money or anything of value?	17 or Older	299	1.3
		Yes	8498	32.4
34.	In the past year, have you often found yourself thinking about gambling or planning to gamble?	No	17714	67.6
		Yes	3932	15.0
35.	In the past year, have you ever spent more than you meant to on gambling?	No	22297	85.0
		Yes	4459	17.0
36.	In the past year, has your gambling ever led to lies to your family?	No	21697	83.0
		Yes	620	2.4
37.	Have you ever used smokeless tobacco (chew, snuff, plug, dipping tobacco, or chewing tobacco)?	No	24522	94.4
		Yes	620	2.4
		Never	22121	84.5
		Once or twice	2218	8.5
38.	How frequently have you used smokeless tobacco during the past 30 days?	Once in a while but not regularly	1012	3.9
		Regularly in the past	343	1.3
		Regularly now	498	1.9
39.	Have you ever smoked cigarettes?	Never	24434	93.6
		Once or twice	839	3.2
		Once or twice a week	267	1.0
		About once a day	180	0.7
39.	Have you ever smoked cigarettes?	More than once a day	372	1.4
		Never	17031	65.7
		Once or twice	4025	15.5
39.	Have you ever smoked cigarettes?	Once in a while but not regularly	2224	8.6

Question Number	Question	Response Options	Count (N)	Percentage (%)
40.	How frequently have you smoked cigarettes during the past 30 days?	Regularly in the past	1035	4.0
		Regularly now	1623	6.3
		Not at all	22198	85.8
		Less than 1 per day	1613	6.2
		One to five cigarettes per day	1123	4.3
		About one-half pack per day	554	2.1
		About one pack per day	267	1.0
		About one and one-half packs per day	81	0.3
		Two packs or more per day	37	0.1
		0 Occasions	12535	48.5
41.	On how many occasions have you had beer, wine, or hard liquor to drink in your lifetime (more than just a few sips)?	1-2 Occasions	4010	15.5
		3-5 Occasions	2318	9.0
		6-9 Occasions	1564	6.1
		10-19 Occasions	1660	6.4
		20-39 Occasions	1369	5.3
		40+ Occasions	2367	9.2
		0 Occasions	18631	72.6
42.	On how many occasions (if any) have you ever had beer, wine or hard liquor during the past 30 days?	1-2 Occasions	3683	14.3
		3-5 Occasions	1557	6.1
		6-9 Occasions	883	3.4
		10-19 Occasions	547	2.1
		20-39 Occasions	202	0.8
		40+ Occasions	166	0.6
		None	21695	84.7
43.	Think back over the last two weeks. How many times have you had had five or more alcoholic drinks in a row?	Once	1520	5.9
		Twice	963	3.8
		3-5 times	890	3.5
		6-9 times	275	1.1
		10 or more times	275	1.1
44.	On how many occasions (if any) have you used marijuana in your lifetime?	0 Occasions	21014	82.4
		1-2 Occasions	1268	5.0
		3-5 Occasions	694	2.7
		6-9 Occasions	426	1.7
		10-19 Occasions	447	1.8

Question Number	Question	Response Options	Count (N)	Percentage (%)
45.	On how many occasions (if any) have you used marijuana during the past 30 days?	20-39 Occasions	452	1.8
		40+ Occasions	1187	4.7
		0 Occasions	23190	92.1
		1-2 Occasions	748	3.0
		3-5 Occasions	316	1.3
46.	On how many occasions (if any) have you used LSD or other psychedelics in your lifetime?	6-9 Occasions	209	0.8
		10-19 Occasions	252	1.0
		20-39 Occasions	178	0.7
		40+ Occasions	293	1.2
		0 Occasions	24073	97.8
47.	On how many occasions (if any) have you used LSD or other psychedelics during the past 30 days?	1-2 Occasions	291	1.2
		3-5 Occasions	115	0.5
		6-9 Occasions	56	0.2
		10-19 Occasions	36	0.1
		20-39 Occasions	25	0.1
48.	On how many occasions (if any) have you used cocaine or crack in your lifetime?	40+ Occasions	26	0.1
		0 Occasions	24004	99.2
		1-2 Occasions	132	0.5
		3-5 Occasions	17	0.1
		6-9 Occasions	14	0.1
49.	On how many occasions (if any) have you used cocaine or crack during the past 30 days?	10-19 Occasions	17	0.1
		20-39 Occasions	7	0.0
		40+ Occasions	6	0.0
		0 Occasions	23203	97.3
		1-2 Occasions	339	1.4
		3-5 Occasions	123	0.5
		6-9 Occasions	46	0.2
		10-19 Occasions	53	0.2
		20-39 Occasions	31	0.1
		40+ Occasions	54	0.2
		0 Occasions	23201	99.2
		1-2 Occasions	112	0.5
		3-5 Occasions	30	0.1
		6-9 Occasions	9	0.0
		10-19 Occasions	19	0.1
		20-39 Occasions	5	0.0
		40+ Occasions	11	0.0

Question Number	Question	Response Options	Count (N)	Percentage (%)
50.	On how many occasions (if any) have you sniffed glue, breathed the contents of an aerosol spray can, or inhaled other gases or sprays in order to get high in your lifetime?	0 Occasions 1-2 Occasions 3-5 Occasions 6-9 Occasions 10-19 Occasions 20-39 Occasions 40+ Occasions	22613 1705 560 245 197 106 123	88.5 6.7 2.2 1.0 0.8 0.4 0.5
51.	On how many occasions (if any) have you sniffed glue, breathed the contents of an aerosol spray can, or inhaled other gases or sprays in order to get high during the past 30 days?	0 Occasions 1-2 Occasions 3-5 Occasions 6-9 Occasions 10-19 Occasions 20-39 Occasions 40+ Occasions	24745 686 179 62 51 24 29	96.0 2.7 0.7 0.2 0.2 0.1 0.1
52.	On how many occasions (if any) have you taken "meth" (also known as 'crank,' 'crystal,' or 'ice') in your lifetime?	0 Occasions 1-2 Occasions 3-5 Occasions 6-9 Occasions 10-19 Occasions 20-39 Occasions 40+ Occasions	25041 237 107 54 65 52 113	97.6 0.9 0.4 0.2 0.3 0.2 0.4
53.	On how many occasions (if any) have you taken "meth" (also known as 'crank,' 'crystal,' or 'ice') during the past 30 days?	0 Occasions 1-2 Occasions 3-5 Occasions 6-9 Occasions 10-19 Occasions 20-39 Occasions 40+ Occasions	25317 103 38 18 24 19 15	99.2 0.4 0.1 0.1 0.1 0.1 0.1
54.	On how many occasions (if any) have you used derbisol in your lifetime?	0 Occasions	25374	100.0
55.	On how many occasions (if any) have you used derbisol during the past 30 days?	0 Occasions	25013	100.0

Question Number	Question	Response Options	Count (N)	Percentage (%)
56.	On how many occasions (if any) have you used other illegal drugs in your lifetime?	0 Occasions 1-2 Occasions 3-5 Occasions 6-9 Occasions 10-19 Occasions 20-39 Occasions 40+ Occasions	23187 868 365 173 176 149 398	91.6 3.4 1.4 0.7 0.7 0.6 1.6
57.	On how many occasions (if any) have you used other illegal drugs during the past 30 days?	0 Occasions 1-2 Occasions 3-5 Occasions 6-9 Occasions 10-19 Occasions 20-39 Occasions 40+ Occasions	24425 434 145 83 89 65 95	96.4 1.7 0.6 0.3 0.4 0.3 0.4
58.	During the past year, how many times (if any) have you driven a car, truck or motorcycle after drinking alcohol?	0 Occasions 1-2 Occasions 3-5 Occasions 6-9 Occasions 10-19 Occasions 20-39 Occasions 40+ Occasions	21512 2083 789 393 374 277 250	83.8 8.1 3.1 1.5 1.5 1.1 1.0
59.	During the past year, how many times (if any) have you been a passenger in a car or truck, or on a motorcycle, driven by someone after they have been drinking alcohol?	0 Occasions 1-2 Occasions 3-5 Occasions 6-9 Occasions 10-19 Occasions 20-39 Occasions 40+ Occasions	15673 4795 2030 1074 941 652 734	60.5 18.5 7.8 4.1 3.6 2.5 2.8
60.	If you drank alcohol (not just a sip or a taste) in the past year, think about the last time you did so. How did you get the alcoholic beverage? (Check YES or NO for each. If you did not drink alcohol in the past year, check DID NOT USE for each one). The last time I drank alcohol....			

Question Number	Question	Response Options	Count (N)	Percentage (%)
a.	I bought it myself with a fake ID	Yes No Did not use	147 10365 15008	0.6 40.6 58.8
b.	I bought it myself without a fake ID	Yes No Did not use	380 10121 14910	1.5 39.8 58.7
c.	I got it from someone I know aged 21 or older	Yes No Did not use	6956 3989 14391	27.5 15.7 56.8
d.	I got it from someone I know under age 21	Yes No Did not use	3904 6914 14541	15.4 27.3 57.3
e.	I got it from a brother or sister	Yes No Did not use	1764 8954 14586	7.0 35.4 57.6
f.	I got it from my home with my parents' permission	Yes No Did not use	2088 8819 14410	8.2 34.8 56.9
g.	I got it from my home without my parents' permission	Yes No Did not use	2575 8218 14533	10.2 32.4 57.4
h.	I got it from another relative	Yes No Did not use	2119 8674 14474	8.4 34.3 57.3
i.	A stranger bought it for me	Yes No Did not use	1125 9561 14575	4.5 37.8 57.7
j.	I took it from a store or shop	Yes No Did not use	284 10316 14622	1.1 40.9 58.0
k.	Other	Yes No Did not use	2138 8043 14599	8.6 32.5 58.9

Question Number	Question	Response Options	Count (N)	Percentage (%)
61.	And at the time you last drank alcohol in the past year, where were you when you drank? (Check YES or NO for each use. If you did not drink alcohol in the past year, check DID NOT USE for each one). On the last day I had alcohol, I drank...			
a.	at my home	Yes No Did not use	4052 7211 13887	16.1 28.7 55.2
b.	at someone else's home	Yes No Did not use	7442 3737 13878	29.7 14.9 55.4
c.	at an open area like a park, beach, back road, or a street corner	Yes No Did not use	2570 8258 14144	10.3 33.1 56.6
d.	at a sporting event or concert	Yes No Did not use	836 9933 14203	3.3 39.8 56.9
e.	at a restaurant, bar or a nightclub	Yes No Did not use	688 10079 14150	2.8 40.5 56.8
f.	at an empty building or a construction site	Yes No Did not use	576 10162 14149	2.3 40.8 56.9
g.	at a hotel/motel	Yes No Did not use	1211 9549 14089	4.9 38.4 56.7
h.	in a car	Yes No Did not use	3639 7190 14029	14.6 28.9 56.4
62.	On the last day you had alcohol, were there one or more adults present?	Yes No Never used	5160 6730 11274	22.3 29.1 48.7
63.	If you smoked a cigarette in the past year, think about the last time you did so. At that time, how did you get the cigarette? (Check YES or NO for each. If you did not smoke a cigarette in the past year,			

Question Number	Question	Response Options	Count (N)	Percentage (%)
	check DID NOT USE for each one). The last time I smoked a cigarette...			
a.	I bought it myself with a fake ID	Yes No Did not use	113 6431 18334	0.5 25.9 73.7
b.	I bought it myself without a fake ID	Yes No Did not use	1003 5572 18203	4.0 22.5 73.5
c.	I got it from someone I know aged 18 or older	Yes No Did not use	3357 3321 18065	13.6 13.4 73.0
d.	I got it from someone I know under age 18	Yes No Did not use	2208 4431 18040	8.9 18.0 73.1
e.	I got it from a brother or sister	Yes No Did not use	762 5805 18089	3.1 23.5 73.4
f.	I got it from home with my parents' permission	Yes No Did not use	579 5924 18107	2.4 24.1 73.6
g.	I got it from home without my parents' permission	Yes No Did not use	1070 5506 18110	4.3 22.3 73.4
h.	I got it from another relative	Yes No Did not use	708 5843 18091	2.9 23.7 73.4
i.	A stranger bought it for me	Yes No Did not use	356 6179 18039	1.4 25.1 73.4
j.	I took it from a store or shop	Yes No Did not use	231 6284 18057	0.9 25.6 73.5
k.	I got it from a vending machine	Yes No Did not use	907 5519 17997	3.7 22.6 73.7
l.	Other	Yes	4	3.4

Question Number	Question	Response Options	Count (N)	Percentage (%)
64.	And at the time you last smoked a cigarette in the past year, where were you when you smoked it? (Check YES or NO for each. If you did not smoke a cigarette in the past year, check DID NOT USE for each one). On the last day I smoked a cigarette, I was....	No	27	22.9
		Did not use	87	73.7
a.		Yes	2108	8.6
		No	4508	18.3
		Did not use	17994	73.1
b.	at someone else's home	Yes	3032	12.4
		No	3591	14.7
		Did not use	17854	72.9
c.	at an open area like a park, beach, back road, or a street corner	Yes	2518	10.3
		No	4022	16.4
		Did not use	17911	73.3
d.	at a sporting event or concert	Yes	750	3.1
		No	5702	23.4
		Did not use	17955	73.6
e.	at a restaurant, bar or nightclub	Yes	747	3.1
		No	5691	23.4
		Did not use	17920	73.6
f.	at an empty building or a construction site	Yes	590	2.4
		No	5854	24.1
		Did not use	17896	73.5
g.	at a hotel/motel	Yes	676	2.8
		No	5753	23.6
		Did not use	17930	73.6
h.	in a car	Yes	3314	13.6
		No	3233	13.2
		Did not use	17906	73.2
65.	On the last day you smoked a cigarettes, were there one or more adults present?	Yes	1586	10.0
		No	14145	89.4
		Never used (Span only)	95	0.6
66.	If you wanted to get some beer, wine, or hard liquor (for example, vodka, whiskey, or gin) how easy	Very hard	7274	30.2

Question Number	Question	Response Options	Count (N)	Percentage (%)
	would it be for you to get some?	Sort of hard Sort of easy Very easy	3911 6447 6430	16.3 26.8 26.7
67.	If you wanted to get some cigarettes, how easy would it be for you to get some?	Very hard	8090	33.8
		Sort of hard Sort of easy Very easy	2932 4107 8819	12.2 17.1 36.8
68.	If a kid smokes marijuana in your neighborhood, or the area around where you live, would the police catch him or her?	NO!	4575	18.6
		no yes YES!	9509 6026 4498	38.6 24.5 18.3
69.	If you wanted to get drugs like cocaine, LSD, or "meth," how easy would it be for you to get some?	Very hard	14692	65.8
		Sort of hard Sort of easy Very easy	4042 2339 1271	18.1 10.5 5.7
70.	If a kid drank some beer, wine, or hard liquor (for example, vodka, whiskey, or gin) in your neighborhood, or the area around where you live, would he or she be caught by the police?	NO!	5574	22.7
		no yes YES!	10139 5318 3553	41.2 21.6 14.5
71.	If you wanted to get a handgun, how easy would it be for you to get one?	Very hard	13494	57.9
		Sort of hard Sort of easy Very easy	4833 2626 2348	20.7 11.3 10.1
72.	If a kid carried a handgun in your neighborhood, or the area around where you live, would he or she be caught by the police?	NO!	2883	11.7
		no yes YES!	7238 7644 6896	29.3 31.0 28.0
73.	If you wanted to get some marijuana, how easy would it be	Very hard	11062	47.9

Question Number	Question	Response Options	Count (N)	Percentage (%)
	for you to get some?	Sort of hard Sort of easy Very easy	3306 3791 4933	14.3 16.4 21.4
74.	If a kid smoked cigarettes in your neighborhood, or the area around where you live, would he or she be caught by the police?	NO! no yes YES!	6669 9504 4618 3630	27.3 38.9 18.9 14.9
75.	How wrong would most adults in your neighborhood, or the area around where you live, think it is for kids your age: to use marijuana?	Very Wrong Wrong A Little Bit Wrong Not Wrong at All	20413 2436 1070 532	83.5 10.0 4.4 2.2
b.	to drink alcohol?	Very Wrong Wrong A Little Bit Wrong Not Wrong at All	13309 5807 3940 1133	55.0 24.0 16.3 4.7
c.	to smoke cigarettes?	Very Wrong Wrong A Little Bit Wrong Not Wrong at All	14421 5401 3361 1128	59.3 22.2 13.8 4.6
d.	to use "meth"?	Very Wrong Wrong A Little Bit Wrong Not Wrong at All	22519 966 358 360	93.0 4.0 1.5 1.5
76.	There are lots of adults in my neighborhood I could talk to about something important.	NO! no yes YES!	3097 5682 8146 7392	12.7 23.4 33.5 30.4
77.	How much does each of the following statements describe your neighborhood, or the area around where you live?			
a.	crime and/or drug selling	NO! no yes YES!	16126 5020 2087 832	67.0 20.9 8.7 3.5
b.	fight	NO!	13469	56.1

Question Number	Question	Response Options	Count (N)	Percentage (%)
c.	lots of empty or abandoned buildings	no	6060	25.2
		yes	3359	14.0
		YES!	1137	4.7
d.	lots of graffiti	NO!	16049	66.9
		no	5647	23.5
		yes	1622	6.8
d.	lots of graffiti	YES!	682	2.8
		NO!	17733	73.9
		no	4925	20.5
a.	Sports teams	yes	834	3.5
		YES!	502	2.1
a.	Sports teams	Yes	22654	94.4
		No	1336	5.6
b.	Scouting	Yes	19148	80.9
		No	4518	19.1
c.	Boys and girls clubs	Yes	17401	73.9
		No	6158	26.1
d.	4-H clubs	Yes	20080	85.3
		No	3447	14.7
e.	Service clubs	Yes	16986	73.3
		No	6198	26.7
f.	Other activities or clubs led or organized by adults	Yes	20452	86.9
		No	3074	13.1
79.	I feel safe in my neighborhood, or the area around where I live.	NO!	533	2.2
		no	1070	4.5
		yes	7784	32.6
80.	I my community there are many fun or interesting things to do that are safe and legal.	YES!	14501	60.7
		NO!	2596	11.0
81.	How wrong do your parents feel it would be for you to: drink beer, wine, or hard liquor (for example, vodka, whiskey, or	no	4578	19.3
		yes	8252	34.8
		YES!	8275	34.9
a.	Very Wrong		15782	66.5

Question Number	Question	Response Options	Count (N)	Percentage (%)
	gin) regularly (at least once or twice a month)?	Wrong A Little Bit Wrong Not Wrong at All	4405 2763 784	18.6 11.6 3.3
b.	smoke cigarettes?	Very Wrong Wrong A Little Bit Wrong Not Wrong at All	18378 3202 1315 771	77.7 13.5 5.6 3.3
c.	smoke marijuana?	Very Wrong Wrong A Little Bit Wrong Not Wrong at All	21582 1150 519 376	91.3 4.9 2.2 1.6
d.	use "meth"?	Very Wrong Wrong A Little Bit Wrong Not Wrong at All	22955 307 102 255	97.2 1.3 0.4 1.1
82.	The rules in my family are clear.	NO! no yes YES!	369 1340 7785 14225	1.6 5.6 32.8 60.0
83.	When I am not at home, one of my parents knows where I am and whom I am with.	NO! no yes YES!	638 2159 8659 12236	2.7 9.1 36.5 51.6
84.	My parents want me to call if I am going to be late getting home.	NO! no yes YES!	392 958 6632 15805	1.6 4.0 27.9 66.4
85.	My family has clear rules about alcohol and drug use.	NO! no yes YES!	403 1529 5923 15817	1.7 6.5 25.0 66.8
86.	Do you feel very close to one or more of your parents?	NO! no yes YES!	924 2061 6592 13955	3.9 8.8 28.0 59.3
87.	Do you share your thoughts and feelings with one or more of your parents?	NO!	2007	8.5

Question Number	Question	Response Options	Count (N)	Percentage (%)
88.	My parents ask me what I think before most family decisions affecting me are made.	no	4817	20.5
		yes	7967	33.9
		YES!	8718	37.1
89.	If I had a personal problem, I could ask one or more of my parents for help.	NO!	2001	8.6
		no	4877	20.9
		yes	9373	40.2
90.	My parents give me lots of chances to do fun things with them.	YES!	7092	30.4
		no	2856	12.2
		yes	8584	36.6
91.	My parents ask if I have gotten my homework done.	YES!	10451	44.5
		no	1323	5.7
		yes	3994	17.1
92.	Would your parents know if you did not come home on time?	YES!	9128	39.0
		no	8952	38.3
		yes	2450	10.5
93.	How important were these questions?	YES!	7364	31.4
		no	12691	54.1
		yes	934	4.0
94.	How honest were you in filling out this survey?	NO!	650	2.8
		no	2125	9.1
		yes	7490	32.1
95.	How important were these questions?	YES!	13103	56.1
		no	4572	19.8
		yes	5520	23.9
96.	How honest were you in filling out this survey?	Very Important	7145	30.9
		Fairly Important	5888	25.5
		Not too important	19611	83.5
97.	How honest were you in filling out this survey?	I was very honest	3338	14.2
		I was honest pretty much of the time	391	1.7
		I was honest some of the time	135	0.6
98.	How honest were you in filling out this survey?	I was honest once in a while	0	0.0
		I was not honest at all		



Appendix D: Item Dictionary for the 2003 NRPFS

SCALES AND QUESTIONS	RESPONSE CATEGORIES	Question Number
DEMOGRAPHICS		
How old are you?	10 or younger, 11, 12, 13, 14, 15, 16, 17, 18, 19 or older	1
What grade are you in?	6, 7, 8, 9, 10, 11, 12	2
Are you:	Female, Male	3
Are you Hispanic or Latino?	Yes, No	4
What is your race?	See questionnaire for complete list of ethnic categories	5
Where are you living now?	On a farm or on a ranch, In the country (not on a farm or ranch), in a city, town, or suburb, On a reservation	6
COMMUNITY: Community Disorganization		
<i>How much do each of the following statements describe your neighborhood:</i>		
crime and/or drug selling	NO!, no, yes, YES!	77a
fights	same as above	77b
lots of empty or abandoned buildings	same as above	77c
lots of graffiti	same as above	77d
I feel safe in my neighborhood	same as above	79
COMMUNITY: Laws and Norms Favorable to Drug Use		
<i>How wrong would most adults in your neighborhood think it was for kids your age:</i>		
to use marijuana?	Very Wrong, Wrong, A little bit wrong, Not wrong at all	75a
to drink alcohol.	same as above	75b
to smoke cigarettes?	same as above	75c

SCALES AND QUESTIONS	RESPONSE CATEGORIES	Question Number
To use “meth?”	same as above	75d
If a kid drank some beer, wine, or hard liquor (for example, vodka, whiskey, or gin) in your neighborhood, would he or she be caught by the police?	NO!, no, yes, YES!	70
If a kid smoked marijuana in your neighborhood would he or she be caught by the police?	NO!, no, yes, YES!	68
If a kid carried a handgun in your neighborhood would he or she be caught by the police?	NO!, no, yes, YES!	72
COMMUNITY: Perceived Availability of Drugs		
If you wanted to get some beer, wine, or hard liquor (for example, vodka, whiskey, or gin), how easy would it be for you to get some?	Very hard, Sort of hard, Sort of easy, Very easy	66
If you wanted to get some cigarettes, how easy would it be for you to get some?	same as above	67
If you wanted to get some marijuana, how easy would it be for you to get some?	same as above	73
If you wanted to get a drug like cocaine, LSD, or amphetamines, how easy would it be for you to get some?	same as above	69
COMMUNITY: Perceived Availability of Handguns		
If you wanted to get a handgun, how easy would it be for you to get one?	same as above	71
COMMUNITY: Opportunities for Prosocial Involvement		
There are lots of adults in my neighborhood I could talk to about something important	NO!, no, yes, YES!	76
<i>Which of the following activities for people your age are available in your community?</i>		

SCALES AND QUESTIONS	RESPONSE CATEGORIES	Question Number
sports teams	YES, No	78a
scouting	same as above	78b
boys and girls clubs	same as above	78c
4-H clubs	same as above	78d
service clubs	same as above	78e
Other activities or clubs led or organized by adults	same as above	78f
FAMILY: Poor Family Management		
My parents ask if I've gotten my homework done.	NO!, no, yes, YES!	91
Would your parents know if you did not come home on time?	same as above	92
When I am not at home, one of my parents knows where I am and who I am with.	same as above	83
My parents want me to call if I am going to be late getting home	same as above	84
The rules in my family are clear	same as above	82
My family has clear rules about alcohol and drug use.	same as above	85
FAMILY: Parental Attitudes Favorable Toward Drug Use		
<i>How wrong do your parents feel it would be for <u>you</u> to:</i>		
drink beer, wine, or hard liquor (for example, vodka, whiskey, or gin) regularly?	Very wrong, Wrong, A little bit wrong, Not wrong at all	81a
smoke cigarettes?	same as above	81b
smoke marijuana?	same as above	81c

SCALES AND QUESTIONS	RESPONSE CATEGORIES	Question Number
Use “meth?”	same as above	81d
FAMILY: Attachment (Questions assessing attachment to mother and father individually in the PNA, are combined to assess attachment to “parents” in the Nebraska survey)		
Do you feel very close to one or more of your parents?	NO!, no, yes, YES!	86
Do you share your thoughts and feeling with one or more parents?	same as above	87
FAMILY: Opportunities for Prosocial Involvement		
My parents give me lots of chances to do fun things with them.	NO!, no, yes, YES!	90
My parents ask me what I think before most family decisions affecting me are made.	same as above	88
If I had a personal problem, I could ask my mom or dad for help.	same as above	89
SCHOOL: Little Commitment to School		
How often do you feel that the school work you are assigned is meaningful and important?	Almost Always, Often, Sometimes, Seldom, Never	12
How interesting are most of your courses to you?	Very Interesting & Stimulating, Quite Interesting, Fairly Interesting, Slightly Dull, Very Dull	13
How important do you think the things you are learning in school are going to be for your later life?	Very Important, Quite Important, Fairly Important, Slightly Important, Not at all Important	14

SCALES AND QUESTIONS	RESPONSE CATEGORIES	Question Number
<i>Now, thinking back over the past year in school, how often did you...</i>		
enjoy being in school?	Never, Seldom, Sometimes, Often, Almost Always	15a
hate being in school?	same as above	15b
try to do your best work in school?	same as above	15c
SCHOOL: Opportunities for Prosocial Involvement		
In my school, students have lost of chances to help decide things like class activities and rules.	NO!, no, yes, YES!	7
There are lots of chances for students in my school to talk with a teacher one-on-one.	same as above	10
Teachers ask me to work on special classroom projects.	same as above	8
There are lots of chances for students in my school to get involved in sports, clubs, and other school activities outside of class.	same as above	9
I have lots of chances to be part of class discussions or activities.	same as above	11
PEER-INDIVIDUALS: Early Initiation of Problem Behavior		
<i>How old were you when you first:</i>		
smoked marijuana?	Never, Have, 10 or younger, 11, 12, 13, 14, 15, 16, 17 or older	16a
smoked a cigarette, even just a puff?	same as above	16b
had more than a sip or two of beer, wine or hard liquor (for example, vodka, whiskey, or gin)	same as above	16c

SCALES AND QUESTIONS	RESPONSE CATEGORIES	Question Number
began drinking alcoholic beverages regularly, that is, at least once or twice a month?	same as above	16d
Used “meth” (also known as ‘crystal,’ ‘crank’ or ‘ice’)? [Nebraska Item Only]	same as above	16e
PEER-INDIVIDUALS: Early Initiation of Antisocial Behavior		
got suspended from school?	same as above	16f
got arrested?	same as above	16g
carried a handgun?	same as above	16h
attacked someone with the idea of seriously hurting them?	same as above	16i
PEER-INDIVIDUALS: Antisocial Behavior		
<i>How many times in the past year (12 months) have you...</i>		
been suspended from school?	Never, 1 or 2 times, 3-5, 6-9, 10-19, 20-29, 30-39, 40+	23a
carried a handgun?	same as above	23b
sold illegal drugs?	same as above	23c
stolen or tried to steal a motor vehicle such as a car or motorcycle?	same as above	23d
been arrested?	same as above	23e
attacked someone with the idea of seriously hurting them?	same as above	23f
been drunk or high at school?	same as above	23g

SCALES AND QUESTIONS	RESPONSE CATEGORIES	Question Number
taken a handgun to school?	same as above	23h
PEER-INDIVIDUALS: Favorable Attitudes Toward Antisocial Behavior		
<i>How wrong do you think it is for someone your age to...</i>		
taken a handgun to school?	Very Wrong, Wrong, A Little Bit Wrong, Not Wrong at All	17a
steal anything worth more than \$5?	same as above	17b
pick a fight with someone?	same as above	17c
attack someone with the idea of seriously hurting them?	same as above	17d
stay away from school all day when their parents think they are at school?	same as above	17e
PEER-INDIVIDUALS: Favorable Attitudes Toward Drug Use		
<i>How wrong do you think it is for someone your age to:</i>		
drink beer, wine or hard liquor (for example, vodka, whiskey or gin) regularly?	Very Wrong, Wrong, A Little Bit Wrong, Not Wrong at All	17f
smoke cigarettes?	same as above	17g
smoke marijuana?	same as above	17h
Used “meth” (also known as ‘crystal,’ ‘crank’ or ‘ice’)? [Nebraska Item Only]	same as above	17i
use LSD, cocaine, amphetamines or another illegal drug? [Modified Item]	same as above	17j
PEER-INDIVIDUALS: Perceived Risks of Drug Use		

SCALES AND QUESTIONS	RESPONSE CATEGORIES	Question Number
<i>How much do you think people risk harming themselves (physically or in other ways) if they:</i>		
Smoke one or more packs of cigarettes per day?	No Risk, Slight Risk, Moderate Risk, Great Risk	29a
Try marijuana once or twice?	same as above	29b
Smoke marijuana regularly?	same as above	29c
Take one or two drinks of an alcoholic beverage (beer, wine, liquor) nearly every day.	same as above	29d
Used "meth" (also known as 'crystal,' 'crank' or 'ice')? [New Nebraska Item]	same as above	29e
PEER-INDIVIDUALS: Social Skills		
You're looking at CD's in a music store with a friend. You look up and see her slip and CD under her coat. She smile and says "Which one do you want? Go ahead, take it while nobody's around."There is nobody in sight, no employees and no other customers. What would you do now?	Ignore her, Grab a CD and leave the store, Tell her to put the CD back, Act like it's a joke and ask her to put the CD back	24
It's 8:00 on a week night and you are about to go over to a friend's home when your mother asks you where you are going. You say "Oh, just going to go hang out with some friends."She says, "No, you'll just get into trouble if you go out. Stay home tonight."What would you do now?	Leave the house anyway, Explain what you are going to do with your friends, tell her when you'd get home, and ask if you can go out, Not say anything and start watching TV, Get into an argument with her	25

SCALES AND QUESTIONS	RESPONSE CATEGORIES	Question Number
You are visiting another part of town, and you don't know any of the people your age there. You are walking down the street, and some teenager you don't know is walking toward you. He is about your size, and as he is about to pass you, he deliberately bumps into you and you almost lose your balance. What would you say or do?	Push the person back, Say "Excuse me" and keep on walking, Say "Watch where you're going" and keep on walking, Swear at the person and walk away	26
You are at a party at someone's house, and one of your friends offers you a drink containing alcohol. What would you say or do?	Drink it; Tell your friend "No thanks, I don't drink" and suggest that you and your friend go and do something else; Just say "No, thanks" and walk away; Make up a good excuse, tell your friend you had something else to do, and leave	27
PEER-INDIVIDUALS: Belief in Moral Order		
I think it is okay to take something without asking if you can get away with it.	NO!, no, yes, YES!	20
I think sometimes it's okay to cheat at school.	same as above	28
It is all right to beat up people if they start the fight.	same as above	18
It is important to be honest with your parents, even if they become upset or you get punished.	same as above	19
PEER-INDIVIDUALS: Gang Involvement		
Have you ever belonged to a gang?	No, Yes	21
If you have ever belonged to a gang, did it have a name?	No, Yes, I have never belonged to a gang	22

SCALES AND QUESTIONS	RESPONSE CATEGORIES	Question Number
<i>How old were you when you first:</i>		
belonged to a gang?	Never, 10 or younger, 11, 12, 13, 14, 15, 16, 17 or older	16j
DRUG USE OUTCOMES		
Have you ever used smokeless tobacco (chew, snuff, plug, dipping tobacco, chewing tobacco)?	Never; Once or twice; Once in a while but not regularly; Regularly in the past; Regularly now	37
How frequently have you used smokeless tobacco during the past 30 days?	Never; Once or twice; Once or twice per week; About once a day; More than once a day	38
Have you ever smoked cigarettes?	Never; Once or twice; Once in a while but not regularly; Regularly in the past; Regularly now	39
How frequently have you smoked cigarettes during the past 30 days?	Not at all; Less than one cigarette per day; 1-5 cigarettes per day; about ½ pack per day, about 1 pack per day; about 1 and ½ packs per day, 2 packs or more per day	40
On how many occasions (if any) have you had alcoholic beverages (beer, wine or hard liquor) to drink in your lifetime - more than just a few sips?	0 occasions, 1-2, 3-5, 6-9, 10-19, 20-39, 40 or more	41
On how many occasions (if any) have you had beer, wine or hard liquor during the past 30 days?	same as above	42
Think back over the last two weeks. How many times have you had five or more alcoholic drinks in a row?	same as above	43
On how many occasions (if any) have you used marijuana in your lifetime?	same as above	44
On how many occasions (if any) have you used marijuana during the past 30 days?	same as above	45

SCALES AND QUESTIONS	RESPONSE CATEGORIES	Question Number
On how many occasions (if any) have you used LSD or other psychedelics in your lifetime?	same as above	46
On how many occasions (if any) have you used LSD or other psychedelics during the past 30 days?	same as above	47
On how many occasions (if any) have you used cocaine or crack in your lifetime?	same as above	48
On how many occasions (if any) have you used cocaine or crack during the past 30 days?	same as above	49
On how many occasions (if any) have you sniffed glue, breathed the contents of an aerosol spray can, or inhaled other gases or sprays, in order to get high in your lifetime?	same as above	50
On how many occasions (if any) have you sniffed glue, breathed the contents of an aerosol spray can, or inhaled other gases or sprays, in order to get high during the past 30 days?	same as above	51
On how many occasions (if any) have you taken “meth” (also known as ‘crank,’ ‘crystal,’ or ‘ice’) in your lifetime?	same as above	52
On how many occasions (if any) have you taken “meth” (also known as ‘crank,’ ‘crystal,’ or ‘ice’) in the past 30-days?	same as above	53
On how many occasions (if any) have you used derbisol in your lifetime?	same as above	54
On how many occasions (if any) have you used derbisol in the past 30 days?	same as above	55
On how many occasions (if any) have you used other illegal drugs in your lifetime?	same as above	56

SCALES AND QUESTIONS	RESPONSE CATEGORIES	Question Number
On how many occasions (if any) have you used other illegal drugs in the past 30 days?	same as above	57
HONESTY		
How honest were you in filling out this survey?	I was very honest; I was pretty honest much of the time; I was honest some of the time; I was honest once in a while; I was not honest at all	94
Other questions contained in the Nebraska 2003 Risk and Protective Factor Survey		
Drinking and Driving		
During the past year, how many times (if any) have you driven a car, truck or motorcycle after drinking alcohol?	0 occasions, 1-2, 3-5, 6-9, 10-19, 20-39, 40 or more	58
During the past year, how many times (if any) have you been a passenger in a car or truck, or on a motorcycle, driven by someone after they had been drinking alcohol?	same as above	59
Sources and Places of Alcohol Use		
If you drank alcohol (not just a sip or a taste) in the past year, think about the <u>last time</u> you did so. How did you get the alcoholic beverage? (Check YES or NO for each. If you did not drink alcohol in the past year, check NO for each one) The last time I drank alcohol...		
I bought it myself <u>with</u> a fake ID	Yes, No, Did not use	60a
I bought it myself <u>without</u> a fake ID	Same as above	60b
I got it from someone I know aged 21 or older	Same as above	60c
I got it from someone I know under age 21	Same as above	60d
I got it from a brother or sister	Same as above	60e

SCALES AND QUESTIONS	RESPONSE CATEGORIES	Question Number
I got it from home <u>with</u> my parents' permission	Same as above	60f
I got it from home <u>without</u> my parents' permission	Same as above	60g
I got it from another relative	Same as above	60h
A stranger bought it for me	Same as above	60i
I took it from a store or shop	Same as above	60j
Other	Same as above	60k
And at the time you last drank alcohol, where were you when you drank? (Check YES or NO for each. If you did not drink alcohol in the past year, check NO for each one.)		
On the last day I had alcohol, I drank...		
At my home	Yes, No, Did not use	61a
At someone else's home	Same as above	61b
At an open area like a park, beach, back road, or a street corner	Same as above	61c
At a sporting event or concert	Same as above	61d
At a restaurant, bar or nightclub	Same as above	61e
At an empty building or a construction site	Same as above	61f
At a hotel/motel	Same as above	61g
In a car	Same as above	61h
On the last day you had alcohol, were there one or more adults present?	Yes, No, Never used	62

SCALES AND QUESTIONS	RESPONSE CATEGORIES	Question Number
Sources and Places of Cigarette Use		
<p>If you smoked a cigarette in the past year, think about the last time you did so. At that time, how did you get the cigarette? (Check YES or NO for each. If you did not smoke a cigarette in the past year, check NO for each one)</p> <p>The last time I smoked a cigarette.....</p>		
I bought it myself <u>with</u> a fake ID	Yes, No, Did not use	63a
I bought it myself <u>without</u> a fake ID	Same as above	63b
I got it from someone I know aged 21 or older	Same as above	63c
I got it from someone I know under age 21	Same as above	63d
I got it from a brother or sister	Same as above	63e
I got it from home <u>with</u> my parents' permission	Same as above	63f
I got it from home <u>without</u> my parents' permission	Same as above	63g
I got it from another relative	Same as above	63h
A stranger bought it for me	Same as above	63i
I took it from a store or shop	Same as above	63j
I got it from a vending machine	Same as above	63k
Other	Same as above	63l

SCALES AND QUESTIONS	RESPONSE CATEGORIES	Question Number
And at the time you last smoked a cigarette, where were you when you smoked it? (Check YES or NO for each. If you did not smoke a cigarette in the past year, check NO for each one.)		
On the last day I smoked a cigarette, I was...		
At my home	Yes, No, Did not use	64a
At someone else's home	Same as above	64b
At an open area like a park, beach, back road, or a street corner	Same as above	64c
At a sporting event or concert	Same as above	64d
At a restaurant, bar or nightclub	Same as above	64e
At an empty building or a construction site	Same as above	64f
At a hotel/motel	Same as above	64g
In a car	Same as above	64h
On the last day you had alcohol, were there one or more adults present?	Same as above	65
In my community there are many fun or interesting things to do that are safe and legal	NO!, no, yes, YES!	80
PEER-INDIVIDUAL: Perceived peer use of ATODs		
How many people your age do you think...		
Smoke cigarettes?	None of them, less than half of them, about half of them, more than half of them, all or almost all of them	30a

Drink alcohol?	Same as above	30b
Smoke marijuana?	Same as above	30c
Use “meth” (also known as ‘crank,’ ‘crystal,’ or ‘ice’)?	Same as above	30d
PEER-INDIVIDUAL: Gambling		
How old were you the first time you gambled (bet money or something of value on sports, a game of chance or skill, played the lottery, or bet cards or dice games)?	Never have, 10 or younger, 11, 12, 13, 14, 15, 16, 17 or older	31
In the past year, have you gambled for money or anything of value?	Yes, No	32
In the last 30 days, have you gambled for money or anything of value?	Same as above	33
In the past year, have you often found yourself thinking about gambling or planning to gamble?	Same as above	34
In the past year, have you ever spent more than you meant to on gambling?	Same as above	35
In the past year, has your gambling ever led to lies to your family?	Same as above	36
Importance of Survey		
How important were these questions?	Not too important, Important, Fairly Important, Very Important	93

Appendix E: Predictors of Cigarette, Alcohol and Marijuana Use

Predictors of Cigarette, Alcohol, and Marijuana Use

The explanation of the analyses that follow is necessarily more statistically complicated than explanations found in the body of the report. The explanation in this section assumes at least a rudimentary understanding of multiple regression and regression prediction models. If the reader lacks experience with these statistical procedures, he or she can extract most of the information from the summary component at the end of this section.

After examining experience with Nebraska students' ATOD use, an important question remained to be addressed: What factors predict use among Nebraska students? To address this question, a series of regression analyses were conducted using 30-day alcohol, cigarettes, and marijuana use as the dependent variables in three separate regression models. Only 30-day use of these substances was considered because analyses sought factors that predict more frequent use rather than one-time use or experimentation.

As predictors of 30-day use, the following variables were entered into the regression model in a stepwise fashion: student's attitude toward the substance (e.g., how wrong is it to smoke cigarettes?), the perceived parental attitude toward the substance (e.g., how wrong do your parents feel it is to smoke cigarettes?), perceived peer approval (e.g., how many people your age smoke?), perceived risk of harm in using the substance (e.g., Risk of harm in smoking one or more packs of cigarettes per day), age of first use, and current age. When interpreting the valence (positive or negative) of the values in the tables, the initial scale must be taken into account; that is, for some variables, the scale is worded such that higher values are preferred, while, for other variables, the scale is worded such that lower values are preferred.

Table 17 shows the results of the regression conducted on 30-day cigarette use. The standardized beta coefficient, partial correlation, and estimate of variance accounted for are provided in the table. As a rule of thumb, any variable with a beta weight of .20 or greater is considered a good predictor of that variable. The variance estimate provided is an estimate of how much variance in the dependent variable is accounted for by the predictor. The variance estimate is found by squaring the partial *r* for each variable and multiplying by 100 to obtain a percentage.

As seen in Table 17, for 30-day cigarette use, only 2 variables were good predictors of use: the student's attitude and the parent's attitude toward use. Even these variables, however, accounted for or explained less than 10% of the variance in 30-day smoking.

Results for analyses using 30-day alcohol use as the dependent variable are presented in Table 18. Only the student's attitude toward drinking alcohol was a significant predictor of 30-day alcohol use; it accounted for just over 10% of the variance in 30-day use.

Table 39. Dependent Variable: 30-Day Cigarette Use

Predictor	Beta	Partial r	Variance Estimate
How wrong it is to smoke cigarettes?	0.32	0.29	8.26
Parent how wrong for you to use cigarettes?	0.25	0.26	6.66
How many people your age smoke?	0.10	0.11	1.22
Risk of harm if smoke one or more packs of cigarettes per day?	-0.09	-0.11	1.24
Age of first cigarette use?	0.08	0.08	0.62
Age?	-0.03	-0.03	0.10

Table 40. Dependent Variable: 30-Day Alcohol Use

Predictor	Beta	Partial r	Variance Estimate
How wrong it is to smoke cigarettes?	0.32	0.29	8.26
Parent how wrong for you to use cigarettes?	0.25	0.26	6.66
How many people your age smoke?	0.10	0.11	1.22
Risk of harm if smoke one or more packs of cigarettes per day?	-0.09	-0.11	1.24
Age of first cigarette use?	0.08	0.08	0.62
Age?	-0.03	-0.03	0.10

Results for analyses using 30-day marijuana use as the dependent variable are presented in Table 19. Only the student's attitude toward marijuana was a significant predictor of 30-day marijuana use; however, it accounted for less than 10% of the variance in 30-day use.

When interpreting the meaning of predictors and their significance, it is important to keep in mind that all statistics presented above depend on which variables and how many variables are included in the model. When variables sharing variance with other variables are removed, the statistics, including variance accounted for, will change. For example, students' attitudes toward substance use will account for more variance when variables such as age or risk are removed. The important component of the results above is the rank order of the variables in terms of beta and variance accounted for. Variables with larger beta weights and greater variance accounted for are at the top of the list. The higher the rank of a variable, the greater the consideration it should be given in intervention planning and programs.

Other variables, such as perceived risk, age, age of first use, and perception of peer approval/use were poor predictors of substance use. These results are in line with previous findings in risk and protective factor assessment; that is, they suggest the key to reducing use lies in changing the students' attitudes toward use and making parental disapproval clear.

Table 41. Dependent Variable: 30-Day Marijuana Use

Predictor	Beta	Partial r	Variance Estimate
How wrong it is to smoke marijuana?	0.36	0.30	8.90
Parent how wrong for you to smoke marijuana?	0.19	0.21	4.33
How many people your age smoke marijuana?	0.10	0.11	1.12
Risk of harm in trying marijuana once or twice?	-0.04	-0.04	0.16
Age of first marijuana use?	0.09	0.76	0.09
Age?	-0.04	-0.05	0.22

Summary

Regardless of which substance one examines, the students' own attitudes toward use are the greatest predictors of actual use. The more wrong a student feels use of a substance is, the more likely he or she is to avoid use of the substance. The second greatest predictor of substance use is the parent's attitude toward use. The more students perceive their parents feel use is wrong, the more likely they are to avoid use of the substance themselves.

Appendix F: Description of Profile Reports, Sample Profile Reports by Gender and State Totals

Risk and Protective Factor Scales and Profiles

Many of the questions on the survey have been combined into risk and protective factor scales. This allows the information contained in items that measure the same type of information to be summarized as a scale score. All of the scales are scored so that the higher the score the greater the risk for risk factors and the greater the protection for protective factors.

A benefit of using the risk and protective factor model in dealing with adolescent social problems is that it provides a method of measuring levels of risk and protection. Once the areas of highest risk and the areas of lowest protection are identified, they can be addressed by programs designed to reduce levels of risk and increase levels of protection. The decreases in risk and increases in protection will ultimately result in a reduction of the rate of youth problem behaviors. After the prevention programs have been implemented, the risk and protective factor levels can again be measured to determine the effectiveness of the intervention.

The questions on the survey have been divided into 13 risk factor scales and 6 protective factor scales. An item dictionary that lists the risk and protective factor scales and the questions they contain has been prepared and included in Appendix D for reference.

In order to make the results of the 2003 Survey more usable, risk and protective profiles have been developed that show the percentage of youth at risk and the percentage of youth with protection on each scale. Profiles have been prepared for counties, regions, school districts, and individual schools.

Interpreting Risk and Protective Factor Profile Reports

The profile reports were developed by Bach Harrison L.L.C. to help disseminate the results of the survey to a wider range of readers. The profile reports for the Nebraska survey contain results from the 2003 administration. The purpose of the report is to provide information to prevention planners that will allow them to begin planning prevention services for their areas. The profile reports contain information specific to a geographic area or population group and are designed to assist in prevention planning at the school, county, region, and state levels. This Appendix contains an example of a complete profile report and charts for

Nebraska males compared to females and a report for statewide results. Briefly, the report contains a description of the Risk and Protective Factor Framework, a section on how to use the information provided in the report, substance use and antisocial behavior charts for grades 6, 8, 10, and 12, risk and protective factor charts for the four grades, risk and protective factor definitions, and numeric tables that contain all of the data displayed in the charts.

An advantage of having the data available from the profile report is that the ATOD use, antisocial behavior, and the percentage of youth at risk and with protection provide a base line that can be used to compare the results from future surveys. A community can determine whether it is becoming more or less at risk in an area by comparing the survey results from one survey administration to the next. Through future student survey administrations; schools, communities, and regional and state agencies that deliver prevention services can effectively evaluate their prevention efforts and determine if those efforts are having the desired effect of reducing risk and increasing protection in youth. These changes in risk and protection will, hopefully, result in the reduction of the level of youth problem behaviors in the community.

For more information on the Nebraska Risk and Protective Factor Student Survey, how to conduct a student survey in your community, the risk and protective factor model of prevention, resource allocation, prevention's best practices, and program evaluation, contact the Nebraska Department of Health, or the Office of Mental Health, Substance Abuse and Addiction.

Nebraska Risk and Protective Factor Student Survey Results for 2003

Male vs. Female Profile Report



Administered by the Nebraska Health and
Human Services System and the
Nebraska Department of Education for
Nebraska Partners in Prevention

Introduction

2003 Male vs. Female Risk and Protective Factor Student Survey Report

This report summarizes the findings from the 2003 Nebraska Risk and Protective Factor Student Survey, the first implementation of a biennial survey of students in grades 6, 8, 10, and 12. The survey was designed to assess adolescent substance use, anti-social behavior, and many of the risk and protective factors that predict adolescent problem behaviors. The Nebraska survey is adapted from a national, scientifically validated survey and contains information on the risk and protective factors that are 1) locally actionable, 2) can not be obtained through any other source, and 3) are more highly correlated with substance abuse. While planning prevention services, communities are urged to collect and use multiple data sources, including archival and social indicators, assessment of existing resources, key informant interviews, as well as data from this survey.

Table 1 contains the characteristics of the students who completed the survey from your community (e.g. school district, county). When using the information in this report, please pay attention to the number and percentage of students who participated from your

Table 1. Characteristics of Participants					
Year of Survey	2003			Male	
	Female			Number	Percent
	Number	Percent	100	12939	100
Total Students					
Grade					
6	2297	22.3	3012	23.3	
8	2770	26.9	3589	27.7	
10	2741	26.7	3299	25.5	
12	2474	24.1	3039	23.5	
Gender					
Male	0	0.0	13195	100.0	
Female	10566	100.0	0	0.0	
Ethnicity					
Hispanic	957	8.6	1195	8.8	
African American	241	2.2	233	1.7	
Asian	175	1.6	166	1.2	
American Indian	493	4.4	569	4.2	
Pacific Islander	80	0.7	66	0.5	
White	9145	82.5	11300	83.5	

Contents:

Introduction:

- Background of Survey
- Characteristics of Participants (The ethnicity categories may add up to more than 100% because students were allowed to select more than one race/ethnic category)
- Risk & Protective Factor Model of Prevention

How to Read the Charts

Tools for Assessment and Planning

Data Charts:

- Substance Use & Antisocial Behavior
- Risk & Protective Factor Profiles
- Sources & Places of Alcohol and Cigarette Use

Risk and Protective Factor Scale Definitions

Data Tables

- Number of Students Who Completed the Survey
- Lifetime ATOD Use
- 30 Day ATOD Use
- Heavy Use of Alcohol and Tobacco
- Antisocial Behavior
- Percentage at Risk
- Percentage with Protection
- Sources and Places of Alcohol and Cigarette Use

Contacts for Prevention

community. If 70% or more of the students participated, the report is a good indicator of the levels of substance use, risk, protection, and antisocial behavior. If fewer than 70% participated, a review of who participated should be completed prior to generalizing the results to the entire community.

The survey was sponsored by Nebraska Partners in Prevention (NePiP), and was administered by the Nebraska Health and Human Service System's Office of Mental Health Substance Abuse and Addiction Services and the Nebraska Department of Education, with assistance from the NePiP Data Monitoring Work Group, the State Survey Design Work Group, the Pacific Institute for Research and Evaluation, the Southwest Prevention Center of the University of Oklahoma; and Bach Harrison, L.L.C.

Risk and Protective Factors

Many states and local communities have adopted the Risk and Protective Factor Model to guide their prevention efforts. The Risk and Protective Factor Model of Prevention is based on the simple premise that to prevent a problem from happening, we need to identify the factors that increase the risk of that problem developing and then find ways to reduce the risks. Just as medical researchers have found risk factors for heart disease such as diets high in fat, lack of exercise, and smoking; a team of researchers at the University of Washington have defined a set of risk factors for youth problem behaviors.

Risk factors are characteristics of school, community, and family environments, as well as characteristics of students and their peer groups that are known to predict increased likelihood of drug use, delinquency, school dropout, teen pregnancy, and violent behavior among youth.

Dr. J. David Hawkins, Dr. Richard F. Catalano, and their colleagues at the University of Washington, Social

Additional Information on Risk and Protective Factors

Development Research Group have investigated the relationship between risk and protective factors and youth problem behavior. For example, they have found that children who live in families with high levels of conflict are more likely to become involved in problem behaviors such as delinquency and drug use than children who live in families with low levels of family conflict.

Protective factors exert a positive influence or buffer against the negative influence of risk, thus reducing the likelihood that adolescents will engage in problem behaviors. Protective factors identified through research reviewed by Drs. Hawkins and Catalano include social bonding to family, school, community and peers; healthy beliefs and clear standards for behavior; and individual characteristics. For bonding to serve as a protective influence, it must occur through involvement with peers and adults who communicate healthy values and set clear standards for behavior.

Research on risk and protective factors has important implications for prevention efforts. The premise of this approach is that in order to promote positive youth development and prevent problem behaviors, it is necessary to address those factors that predict the problem. By measuring risk and protective factors in your community, factors that are particularly high (or low) can be identified. These factors may be especially important ones to address. For example, if academic failure is identified as an elevated risk factor in a community, then mentoring, tutoring, and increased opportunities and rewards for classroom participation can be provided to improve academic performance.

The chart at the right shows the links between 16 risk factors and the five problem behaviors examined by Drs. Hawkins and Catalano. The check marks have been placed in the chart to indicate where at least two well designed, published research studies have shown a link between the risk factor and the problem behavior.

YOUTH AT RISK	PROBLEM BEHAVIORS				
	Substance Abuse	Delinquency	Teen Pregnancy	School Drop-Out	Violence
Community					
Availability of Drugs and Firearms	✓				✓
Community Laws and Norms Favorable Toward Drug Use	✓				
Transitions and Mobility	✓	✓		✓	
Low Neighborhood Attachment and Community Disorganization	✓	✓			✓
Extreme Economic and Social Deprivation	✓	✓	✓	✓	✓
Family					
Family History of High Risk Behavior	✓	✓	✓	✓	
Family Management Problems	✓	✓	✓	✓	✓
Family Conflict	✓	✓	✓	✓	✓
Favorable Parental Attitudes and Involvement in the Problem Behavior	✓	✓			✓
School					
Early and Persistent Antisocial Behavior	✓	✓	✓	✓	✓
Academic Failure in Elementary School	✓	✓	✓	✓	✓
Lack of Commitment to School	✓	✓	✓	✓	
Individual/Peer					
Alienation and Rebelliousness	✓	✓		✓	
Friends Who Engage in a Problem Behavior	✓	✓	✓	✓	✓
Favorable Attitudes Toward the Problem Behavior	✓	✓	✓	✓	
Early Initiation of the Problem Behavior	✓	✓	✓	✓	✓

How to Read the Charts in this Report

There are four types of charts presented in this report: 1) substance use and antisocial behavior charts, 2) risk factor charts, 3) protective factor charts, and 4) charts indicating sources and contexts for use of alcohol and cigarettes. All the charts show the results of your community's 2003 Risk and Protective Factor Student Survey data compared to the overall state data. The actual percentages from the charts are presented in a table format at the end of this report.

Substance Use and Antisocial Behavior Charts

This report contains information about alcohol, tobacco and other drug use (referred to as ATOD use throughout the report) and other problem behaviors of students. The bars on each chart represent the percentage of students in the selected grades who reported the behavior. For example, for the overall state, approximately 70 percent of students in high school reported that they 'ever used alcohol'. This means that 70 percent of the high school students reported that they had tried alcohol at least once in their lifetime. The four sections in the charts represent different types of problem behaviors. The definitions of each of the types of behavior are provided below.

- **Ever-used** is a measure of the percentage of students who tried the particular substance at least once in their lifetime and is used to show the level of experimentation with a particular substance.
- **30-day use** is a measure the percentage of students who used the substance at least once in the 30 days prior to taking the survey and is a more sensitive indication of the level of current use of the substance.
- **Binge drinking** (five or more drinks in a row during the two weeks prior to the survey) and **30-day use of a pack or more of cigarettes per day** are measures of heavy use of alcohol and tobacco.
- **Antisocial behavior (ASB)** is a measure of the percentage of students who report **any involvement** with the antisocial behaviors listed in the charts **in the past year**. In the charts, antisocial behavior will often be abbreviated as ASB.

- **Dots** are used on the charts to show the overall state average for all of the youth in each grade who participated in the 2003 survey. The dots allow a community to compare the results from their youth to youth in grades 6, 8, 10, and 12 throughout the state who participated in the survey. Information about other students in the state can be helpful in determining the seriousness of a given level of problem behavior. For example, if the percentage of students in your community engaging in a problem behavior is significantly higher than the state average, it is most likely an issue of concern and merits attention.

Risk and Protective Factor Charts

In order to make the results of the 2003 Nebraska Risk and Protective Factor Student Survey more useable, risk and protective profiles were developed that show the percentage of youth at risk and the percentage of youth with protection on each scale. Students are defined as being at risk if their score for that factor exceeds the score that was at the 44th percentile in a large study conducted in seven different states. The seven states included in the norm group were Colorado, Illinois, Kansas, Maine, Oregon, Utah, and Washington. Students are defined as having a protective factor when their score for the protective factor exceeds the 56th percentile score for the seven-state study. The seven-state values are shown on the charts as a dashed line. As with the Substance Use and Antisocial Behavior Charts, the dots on the Risk and Protective Factor Charts show the average of all youth who were surveyed in the state.

Sources and Places of Alcohol and Cigarette Use Charts

The percentage of students who obtained alcohol and cigarettes from specific sources and the percentage who used alcohol and cigarettes in specific places in the past year is shown in charts for each grade. The percentages are based upon only those students who used alcohol (for alcohol questions) or cigarettes (cigarette questions) in the past year. Also included in the charts is the percentage of students who reported that an adult was present when they used alcohol or cigarettes.

Tools for Assessment and Planning

School and Community Improvement Using Survey Data

Why Conduct the Risk and Protective Factor Survey?

Data from the Nebraska Risk and Protective Factor Student Survey can be used to help schools and communities assess current conditions and identify and prioritize local prevention issues. The risk and protective factor profiles provided by this survey reflect underlying conditions that can be addressed through specific types of interventions that have been proven to be effective in either reducing risk(s) or enhancing protection(s). The steps for conducting a comprehensive and effective prevention planning process are outlined in detail in the Nebraska Partners in Prevention “Evidence-Based Planning Toolkit”, which can be downloaded at www.nebraskaprevention.org, or obtained in print form by contacting the Nebraska Behavioral Health Prevention Program at (402) 479-5573. This toolkit can help your school and community identify, prioritize and address specific needs; make key decisions regarding allocation of resources; and select and implement effective strategies that will result in sustainable outcomes

What are the numbers telling you?

Review the charts and data tables presented in this report. Using the table below, note your findings as you discuss the following questions.

- Which 3-5 risk factors are of the greatest concern?
- Which 3-5 protective factors are your community’s highest priority?
- Which levels of 30-day drug use are of greatest concern?
 - Which substances are your students using the most?
 - At which grades do you see unacceptable usage levels?
- Which levels of antisocial behaviors are of greatest concern?
 - Which behaviors are your students exhibiting the most?
 - At which grades do you see unacceptable behavior levels?

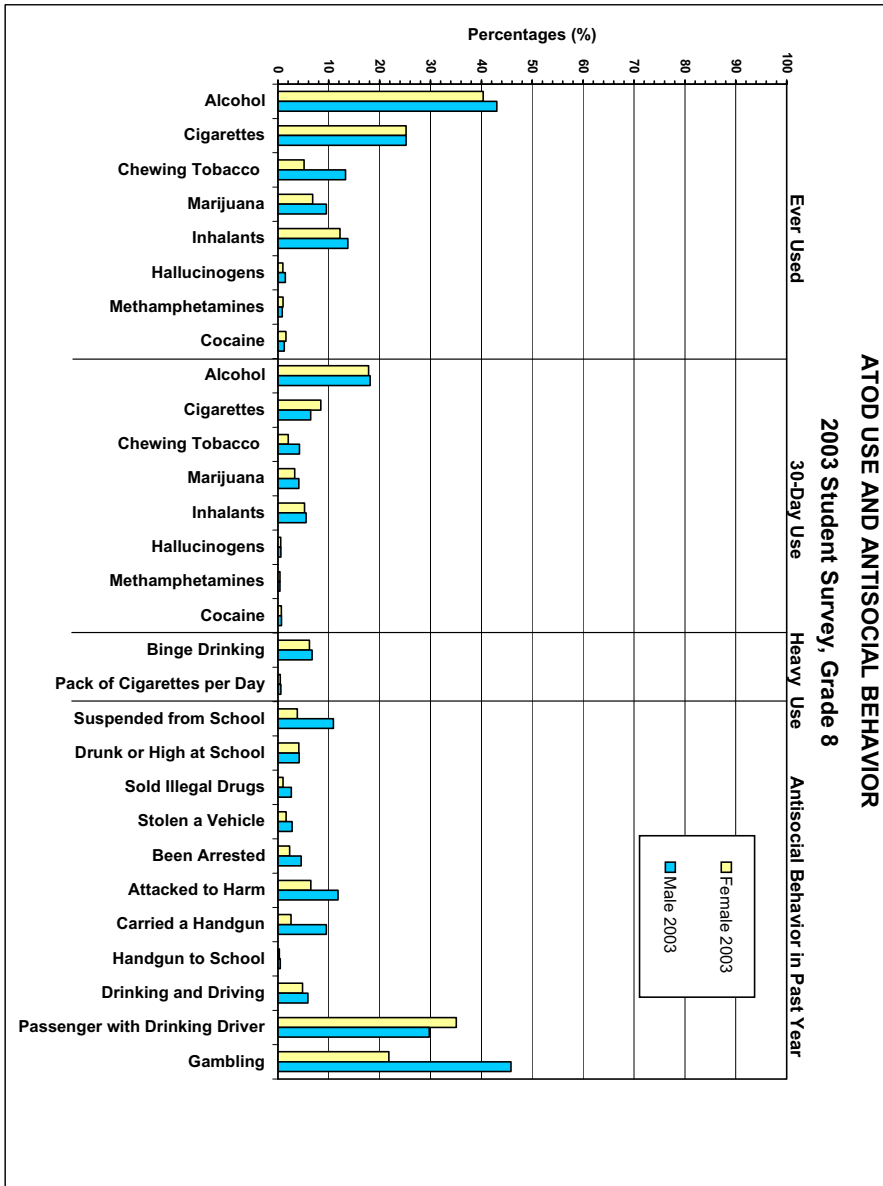
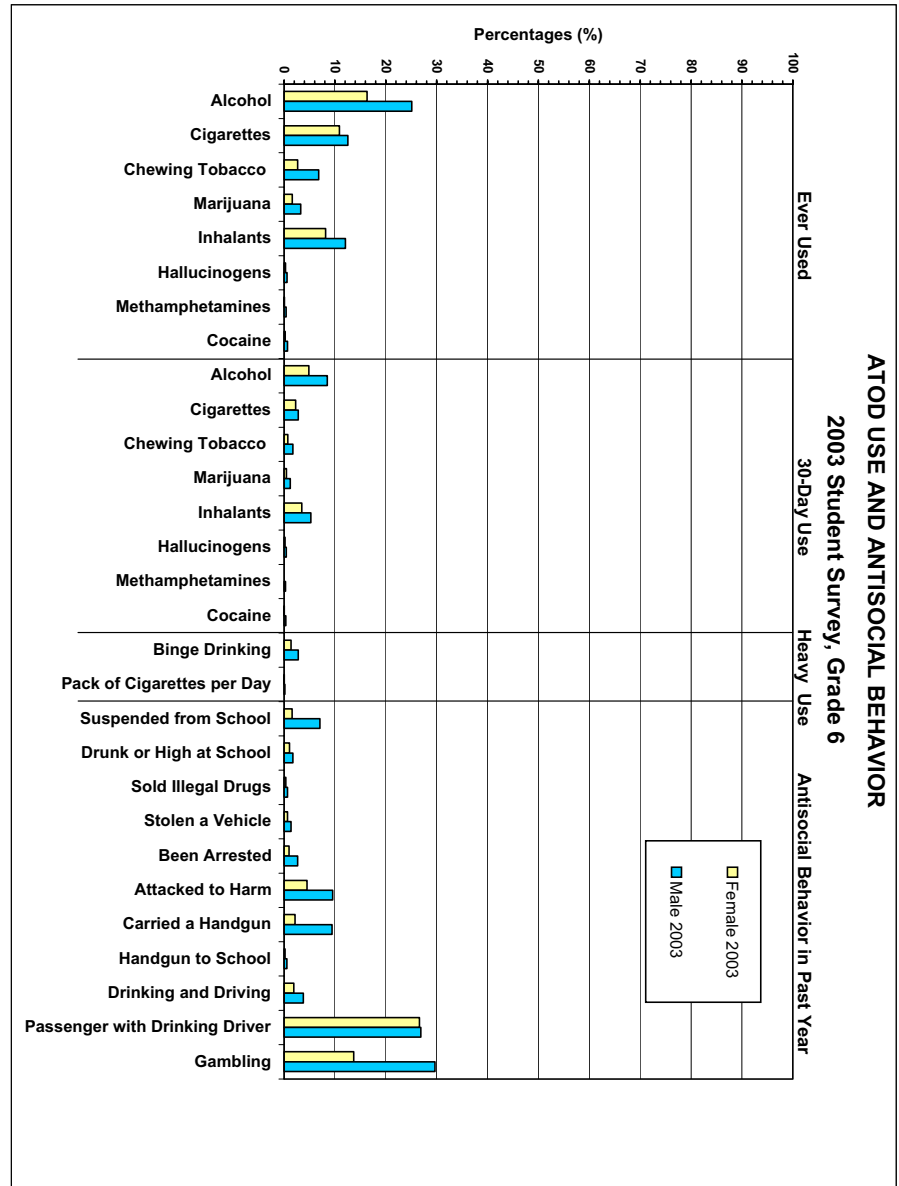
How to decide if a rate is unacceptable.

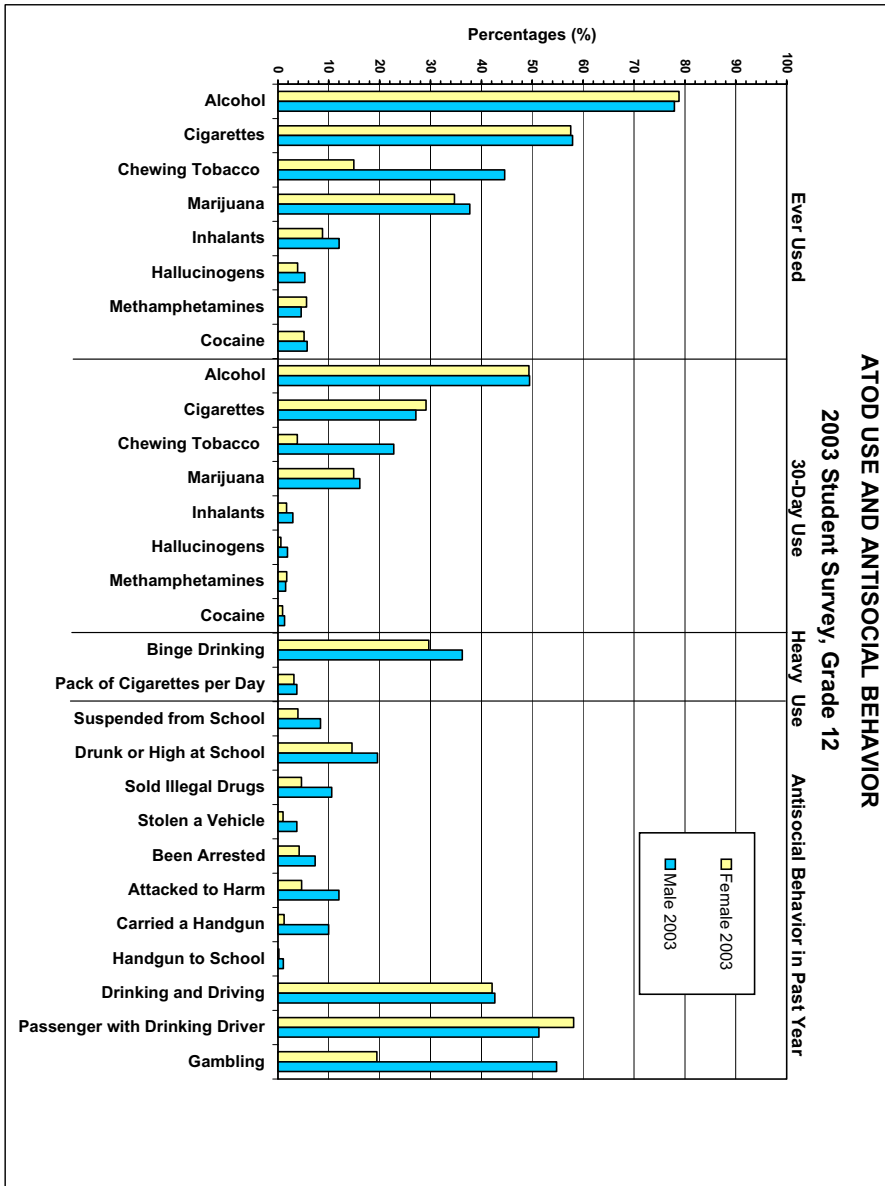
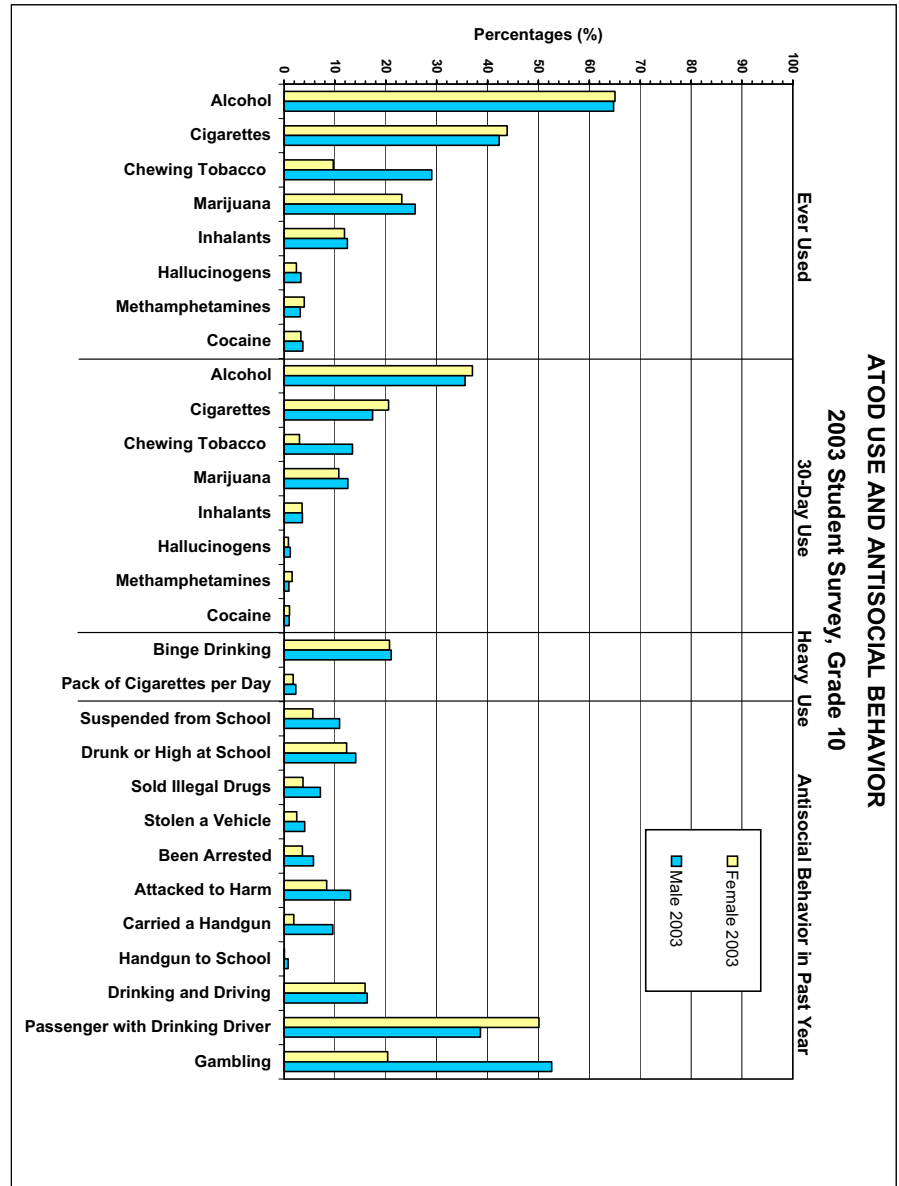
- **Look across the charts** – which items stand out as either much higher or much lower than the others?
- **Compare your data with statewide and national data** – differences of 5% between local and other data are probably significant.
- **Determine the standards and values held within your community** – For example: Is it acceptable in your community for a percentage of high school students to drink alcohol regularly as long as that percentage is lower than the overall state rate?

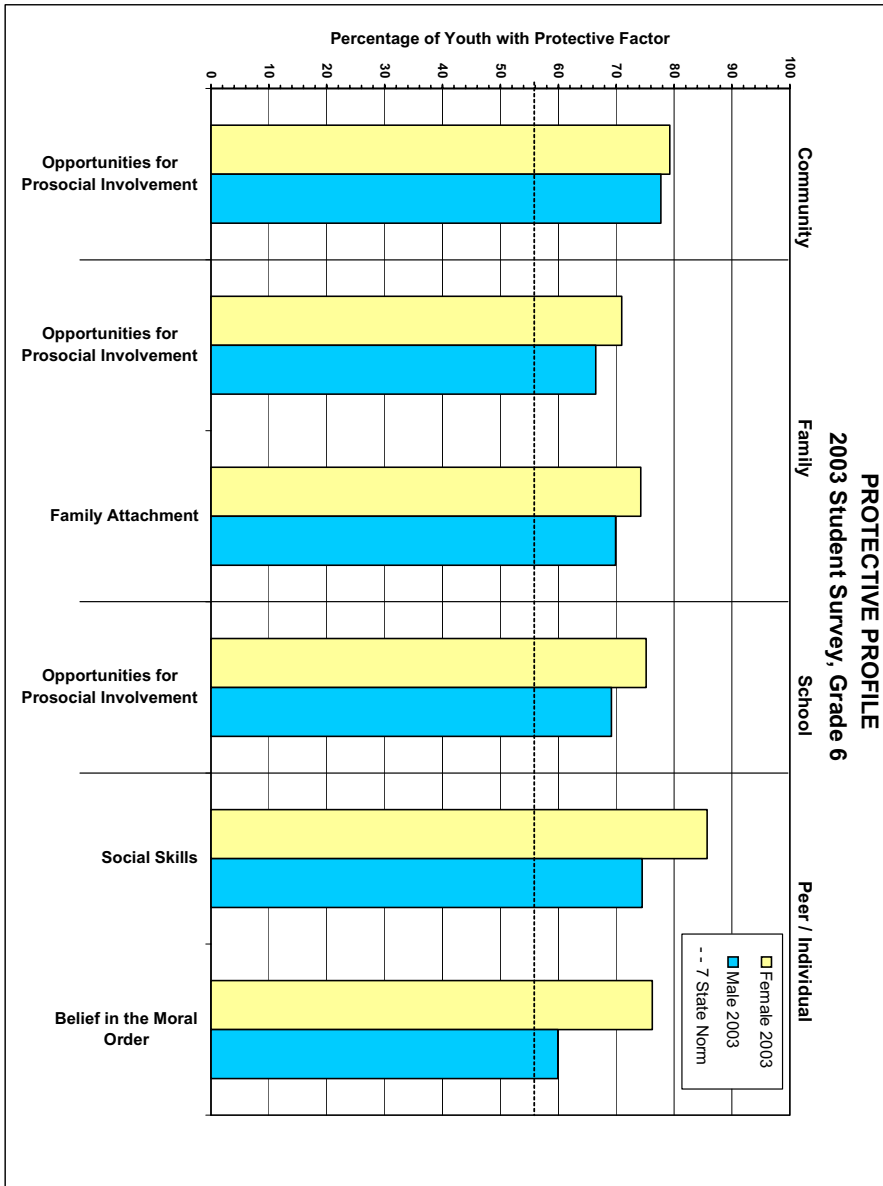
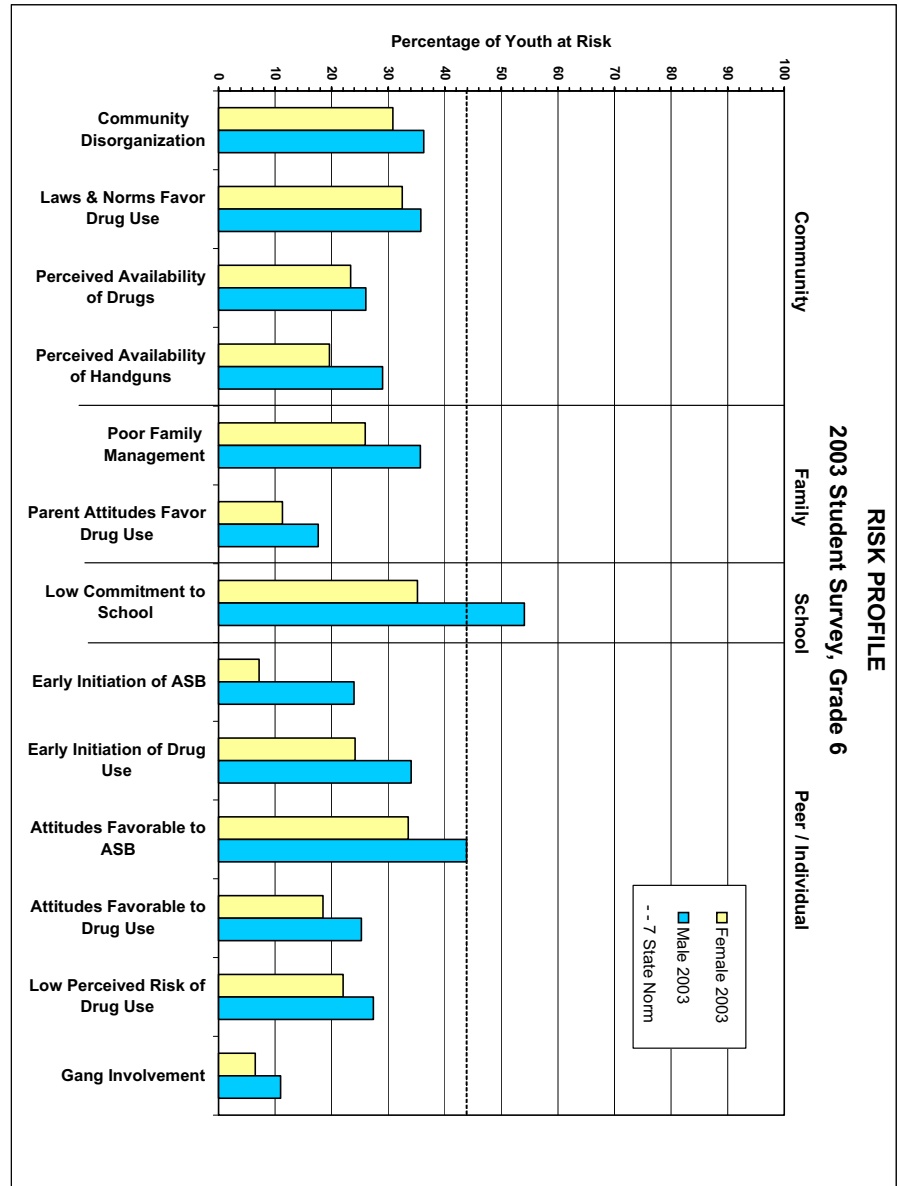
Use these data for planning.

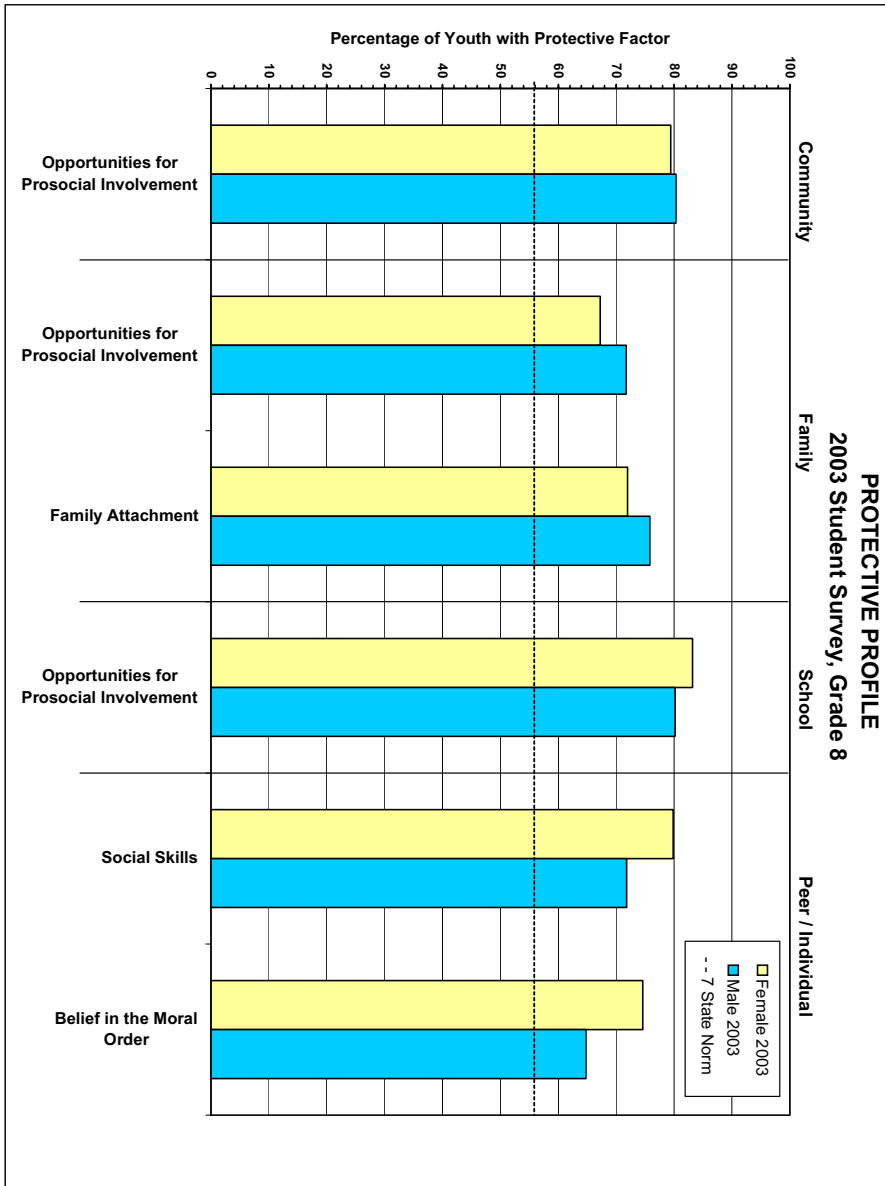
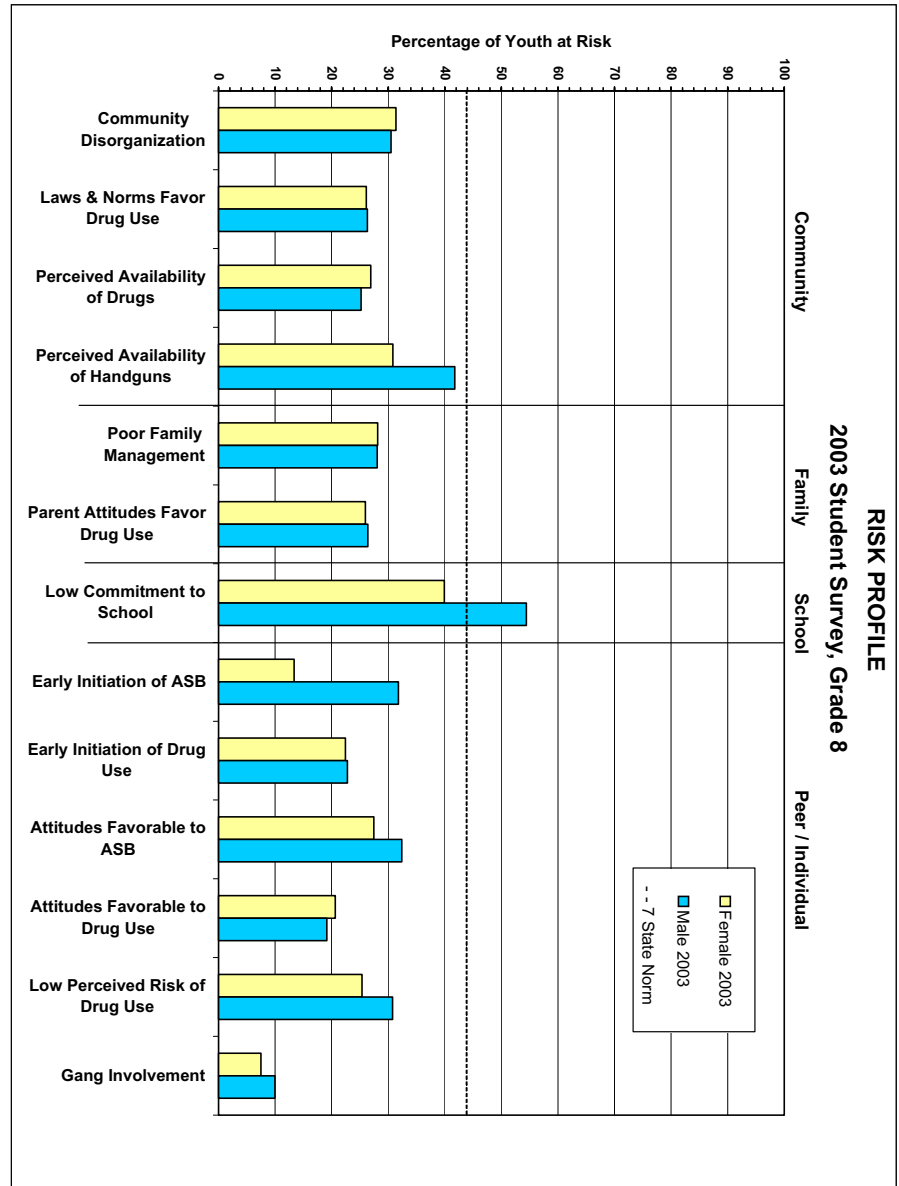
- **Substance use and antisocial behavior data** – identify issues, raise awareness about the problems, and promote school and community dialogue.
- **Risk and protective factor data** – identify key objectives that will help your school or community achieve its prevention goals.
- **Science-Based and Promising Strategies** – The Nebraska Partners in Prevention “Guidance Document for Science-Based and Promising Substance Abuse Prevention Strategies”, provides information on science-based and promising policies, practices and programs that have been proven effective in decreasing substance abuse. This document is scheduled for a February 2004 release, and will be available for download at www.nebraskaprevention.gov or by contacting the Nebraska Behavioral Health Prevention Program at (402) 479-5573.

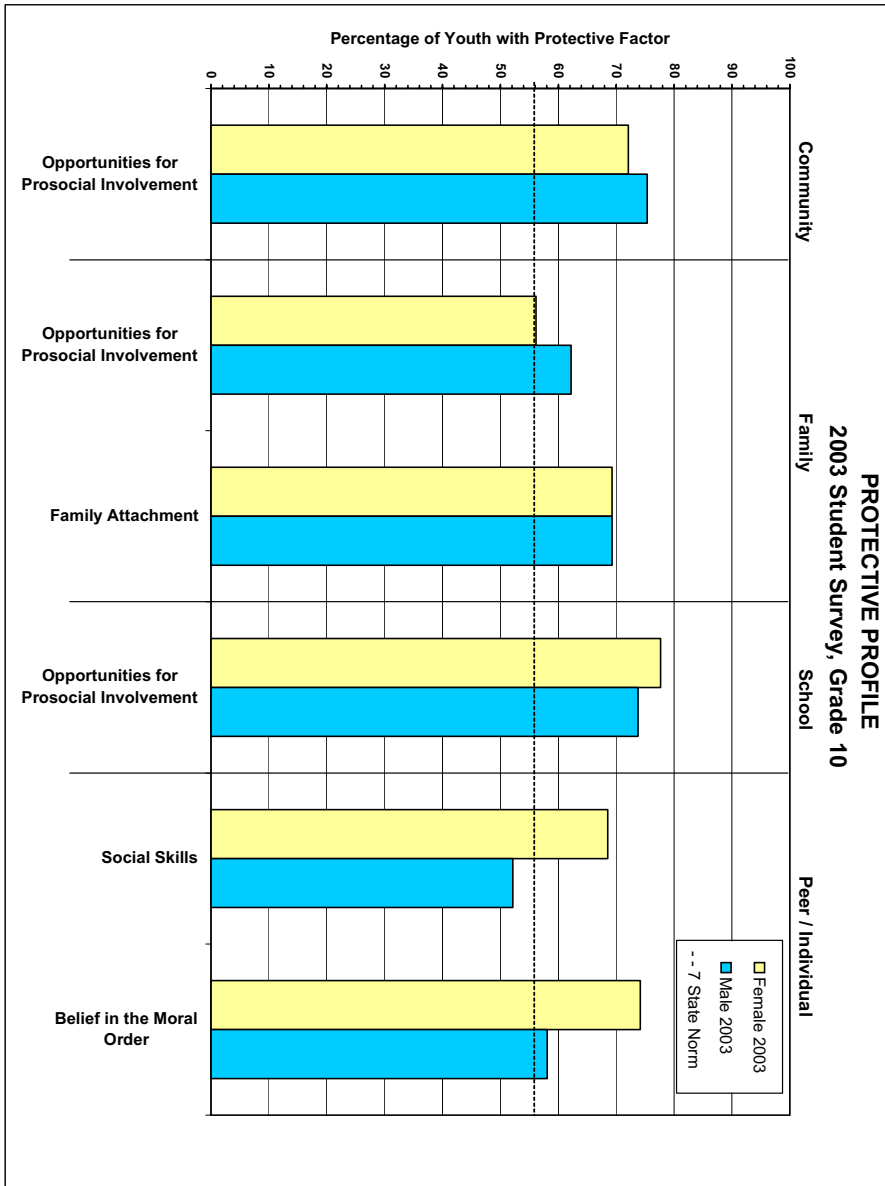
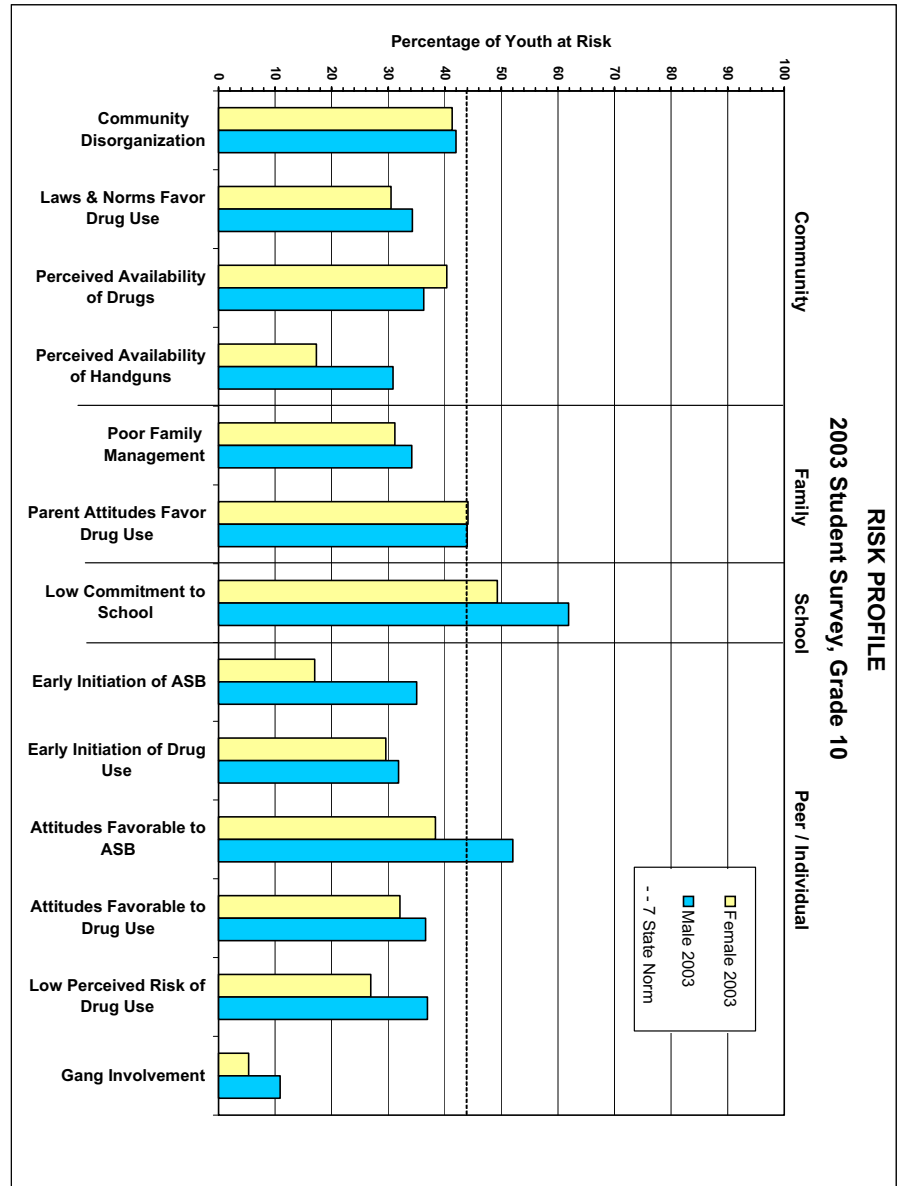
MEASURE				
Risk Factors				
Protective Factors				
Substance Use				
Antisocial Behaviors				
Unacceptable Rate #1	Unacceptable Rate #2	Unacceptable Rate #3	Unacceptable Rate #4	

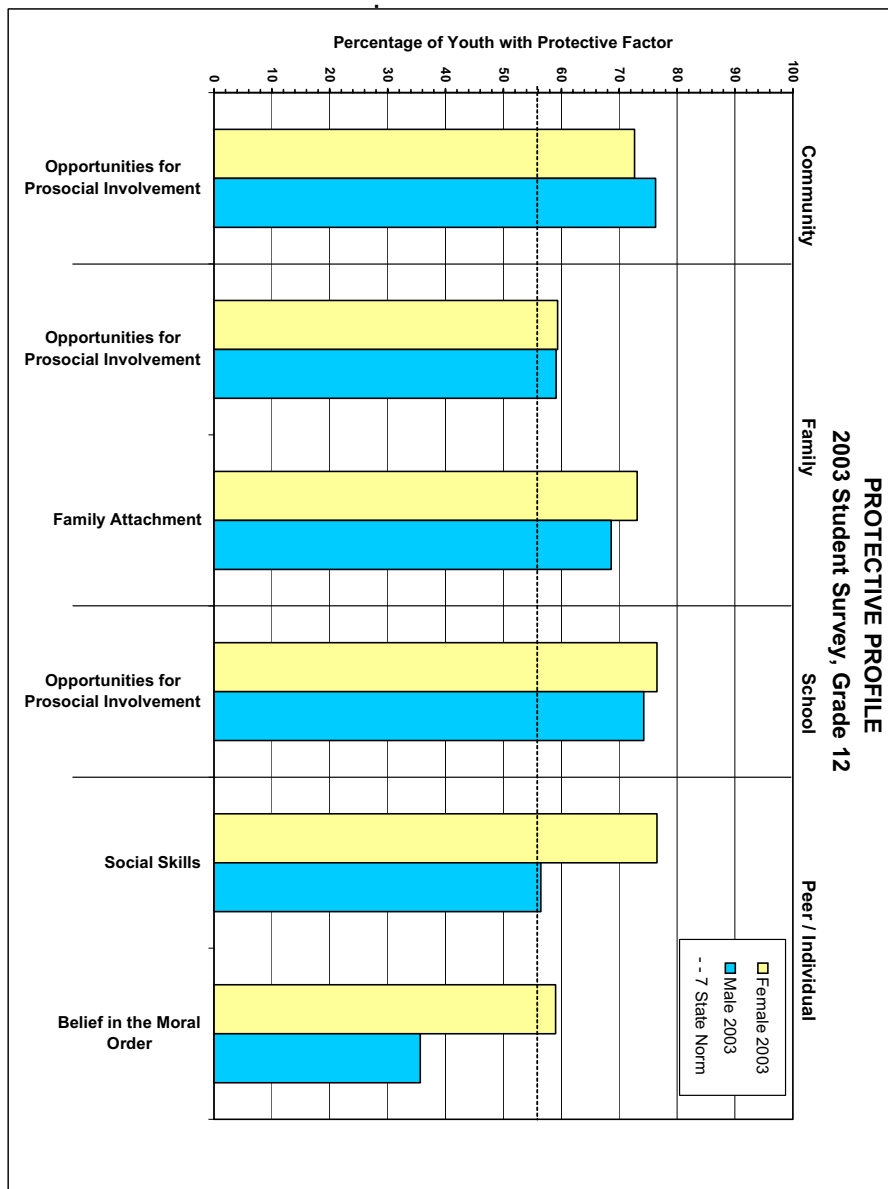
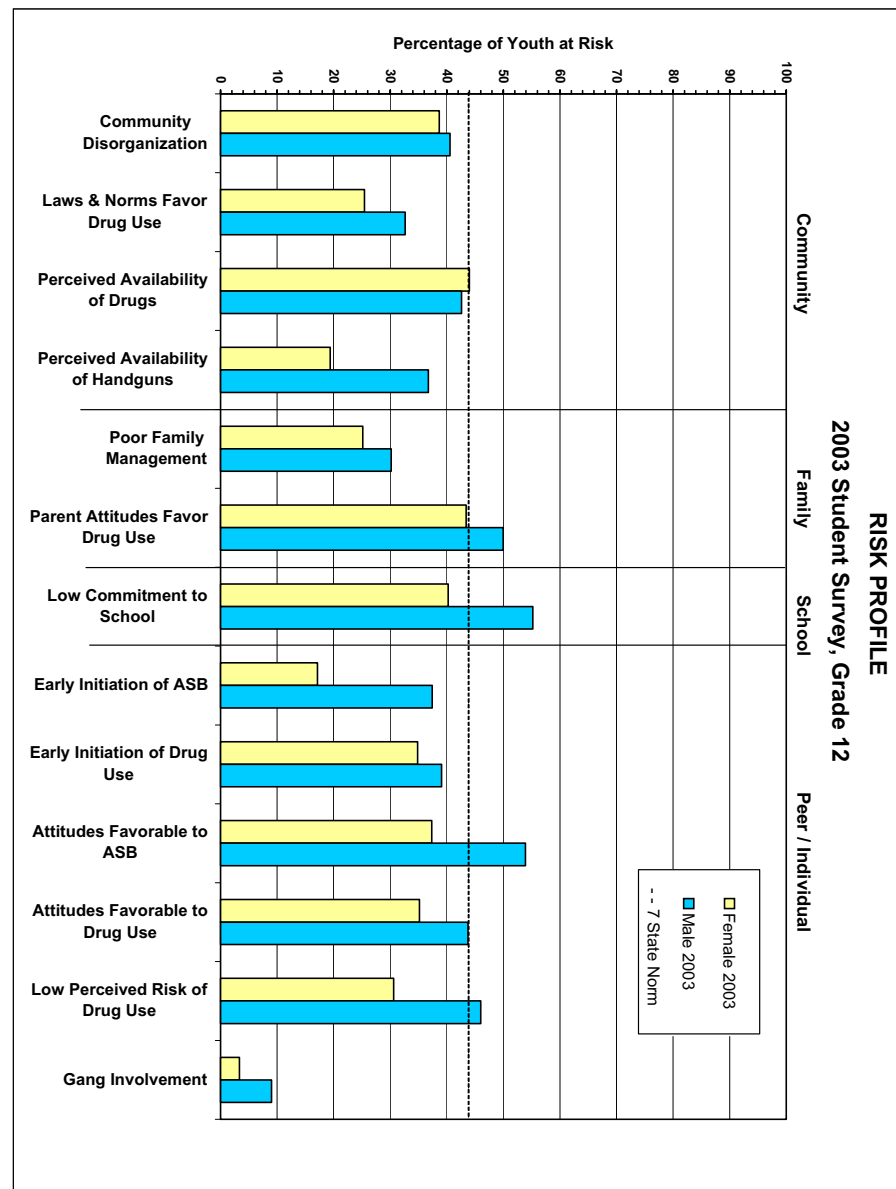


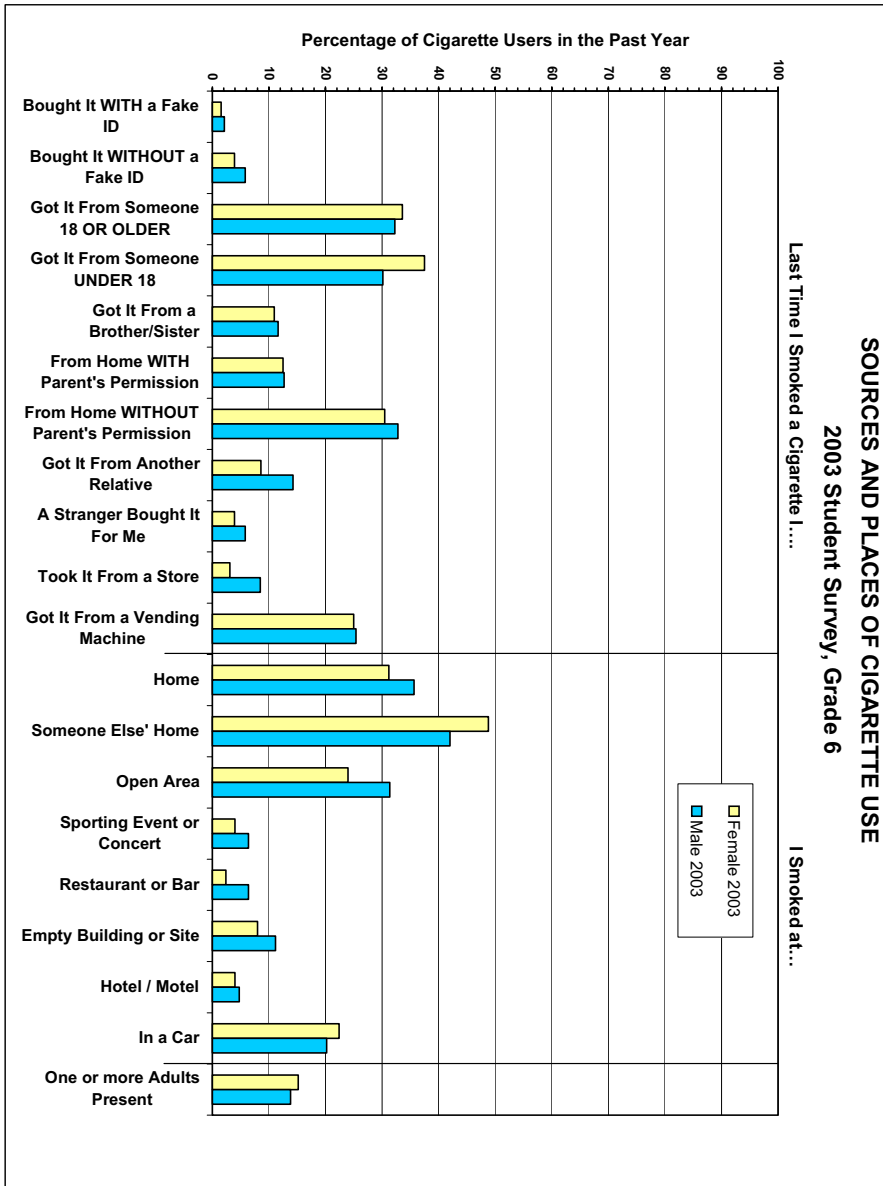
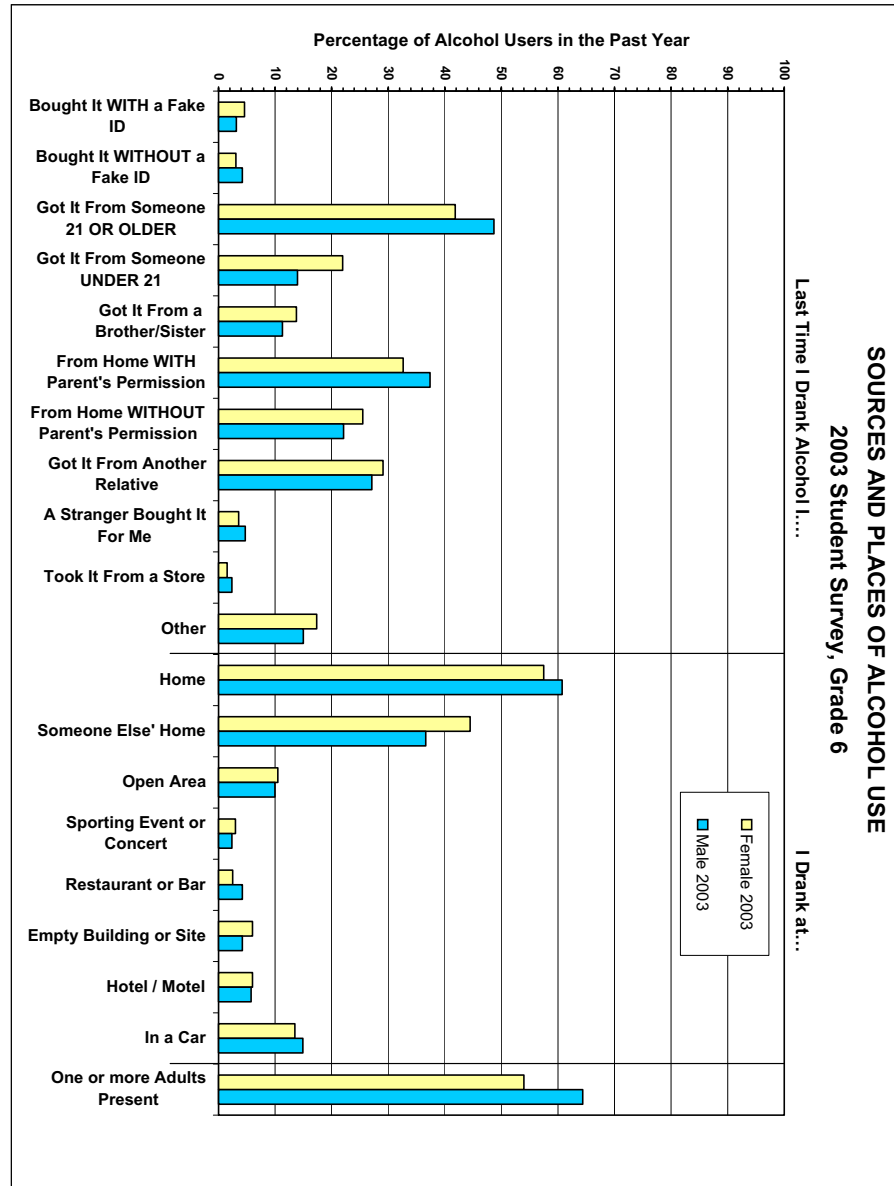












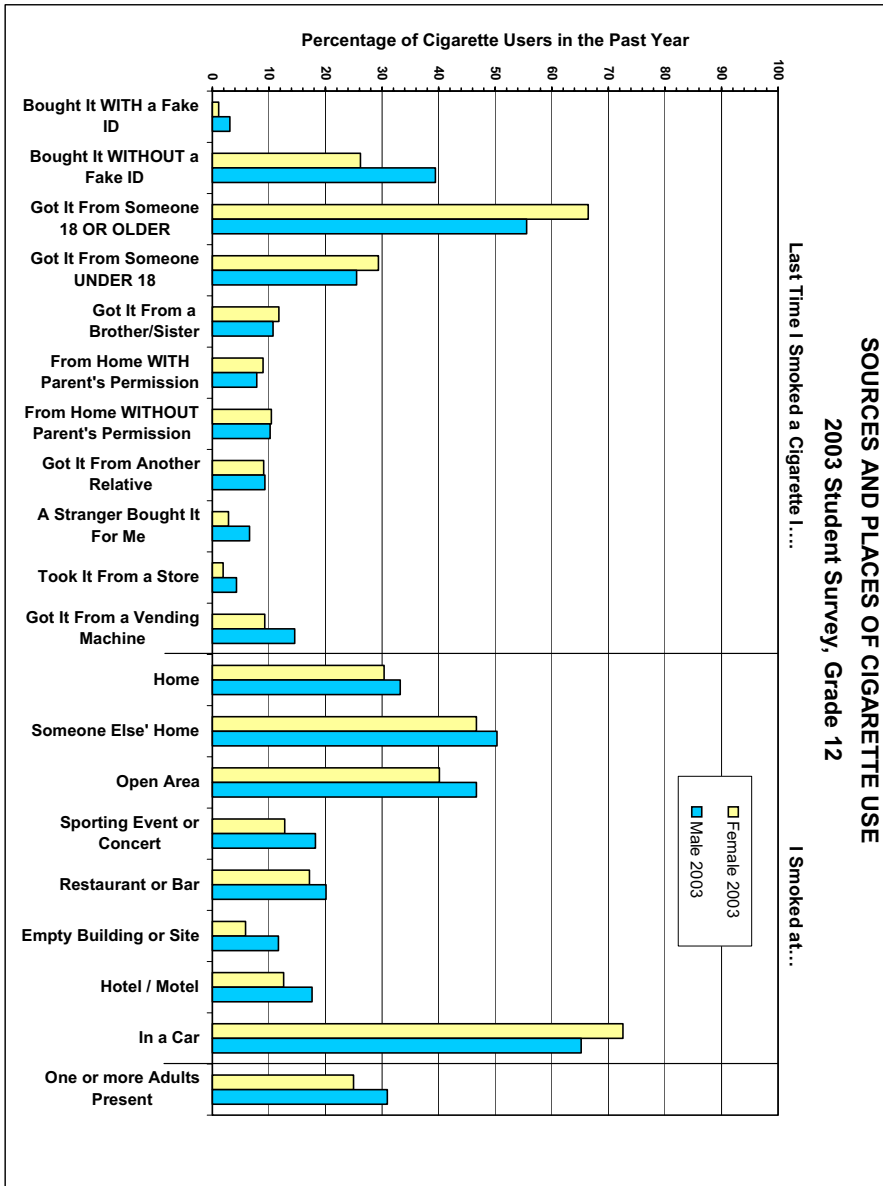
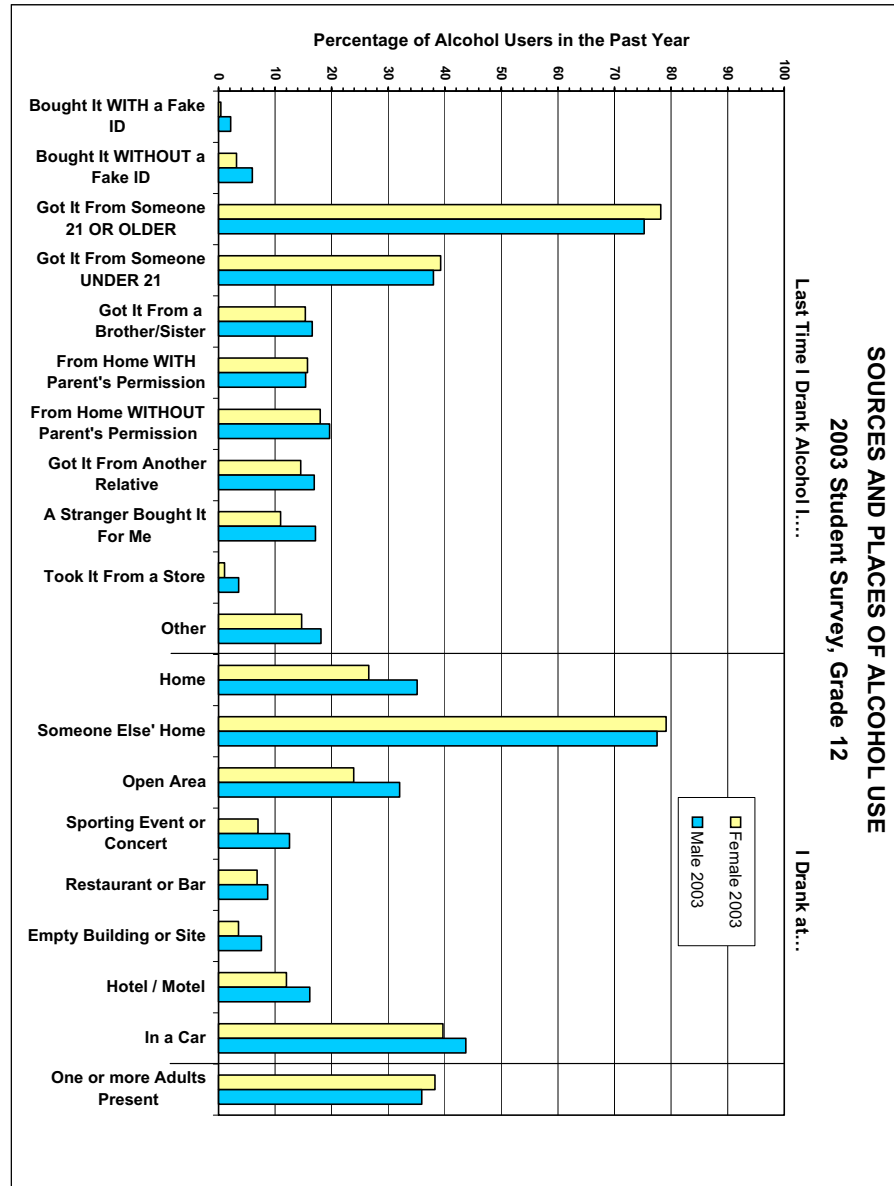


Table 2. Scales that Measure the Risk and Protective Factors Shown in the Profiles	
Additional risk factor measures based upon archival data can be found on the Nebraska prevention web site http://www.nebraskaprevention.gov/pdf/SICA_RFA.pdf pages 52-53	
<i>Community Domain Risk Factors</i>	
Community Disorganization	Research has shown that neighborhoods with high population density, lack of natural surveillance of public places, physical deterioration, and high rates of adult crime also have higher rates of juvenile crime and drug selling.
Laws and Norms Favorable Toward Drug Use	Research has shown that legal restrictions on alcohol and tobacco use, such as raising the legal drinking age, restricting smoking in public places, and increased taxation have been followed by decreases in consumption. Moreover, national surveys of high school seniors have shown that shifts in normative attitudes toward drug use have preceded changes in prevalence of use.
Perceived Availability of Drugs and Handguns	The availability of cigarettes, alcohol, marijuana, and other illegal drugs has been related to the use of these substances by adolescents. The availability of handguns is also related to a higher risk of crime and substance use by adolescents.
<i>Community Domain Protective Factors</i>	
Opportunities for Positive Involvement	When opportunities are available in a community for positive participation, children are less likely to engage in substance use and other problem behaviors.
<i>Family Domain Risk Factors</i>	
Parental Attitudes Favorable Toward Antisocial Behavior & Drugs	In families where parents use illegal drugs, are heavy users of alcohol, or are tolerant of children's use, children are more likely to become drug abusers during adolescence. The risk is further increased if parents involve children in their own drug (or alcohol) using behavior, for example, asking the child to light the parent's cigarette or get the parent a beer from the refrigerator.
Poor Family Management	Parents' use of inconsistent and/or unusually harsh or severe punishment with their children places them at higher risk for substance use and other problem behaviors. Also, parents' failure to provide clear expectations and to monitor their children's behavior makes it more likely that they will engage in drug abuse whether or not there are family drug problems
<i>Family Domain Protective Factors</i>	
Family Attachment	Young people who feel that they are a valued part of their family are less likely to engage in substance use and other problem behaviors.
Opportunities for Positive Involvement	Young people who are exposed to more opportunities to participate meaningfully in the responsibilities and activities of the family are less likely to engage in drug use and other problem behaviors.
<i>School Domain Risk Factors</i>	
Low Commitment to School	Surveys of high school seniors have shown that the use of hallucinogens, cocaine, heroin, stimulants, and sedatives or nonmedically prescribed tranquilizers is significantly lower among students who expect to attend college than among those who do not. Factors such as liking school, spending time on homework, and perceiving the coursework as relevant are also negatively related to drug use.
<i>School Domain Protective Factors</i>	
Opportunities for Positive Involvement	When young people are given more opportunities to participate meaningfully in important activities at school, they are less likely to engage in drug use and other problem behaviors.

Table 2. Scales that Measure the Risk and Protective Factors Shown in the Profiles (Continued)	
<i>Peer-Individual Risk Factors</i>	
<i>Early Initiation of Antisocial Behavior and Drug Use</i>	Early onset of drug use predicts misuse of drugs. The earlier the onset of any drug use, the greater the involvement in other drug use and the greater frequency of use. Onset of drug use prior to the age of 15 is a consistent predictor of drug abuse, and a later age of onset of drug use has been shown to predict lower drug involvement and a greater probability of discontinuation of use.
<i>Attitudes Favorable Toward Antisocial Behavior and Drug Use</i>	During the elementary school years, most children express anti-drug, anti-crime, and pro-social attitudes and have difficulty imagining why people use drugs or engage in antisocial behaviors. However, in middle school, as more youth are exposed to others who use drugs and engage in antisocial behavior, their attitudes often shift toward greater acceptance of these behaviors. Youth who express positive attitudes toward drug use and antisocial behavior are more likely to engage in a variety of problem behaviors, including drug use.
<i>Perceived Risk of Drug Use</i>	Young people who do not perceive drug use to be risky are far more likely to engage in drug use.
<i>Gang Involvement</i>	Youth who belong to gangs are more at risk for antisocial behavior and drug use.
<i>Peer-Individual Protective Factors</i>	
<i>Social Skills</i>	Young people who are socially competent and engage in positive interpersonal relations with their peers are less likely to use drugs and engage in other problem behaviors.
<i>Belief in the Moral Order</i>	Young people who have a belief in what is "right" or "wrong" are less likely to use drugs.

Table 3. Number of Students Who Completed the Survey

	Grade 6		Grade 8		Grade 10		Grade 12	
	Female	Male	Female	Male	Female	Male	Female	Male
Number of Youth	2297	3012	2770	3589	2741	3299	2474	3039

Table 4. Percentage of Students Who Used ATODs During Their Lifetime

	Grade 6		Grade 8		Grade 10		Grade 12	
Drug Used	Female	Male	Female	Male	Female	Male	Female	Male
Alcohol	16.32	25.12	40.37	43.03	65.05	64.77	78.84	77.91
Cigarettes	10.88	12.55	25.18	25.20	43.85	42.30	57.57	57.93
Chewing Tobacco	2.68	6.80	5.13	13.30	9.67	29.04	14.95	44.56
Marijuana	1.63	3.25	6.85	9.50	23.14	25.78	34.70	37.73
Inhalants	8.16	12.07	12.22	13.77	11.88	12.44	8.77	12.01
Hallucinogens	0.29	0.58	0.97	1.44	2.45	3.28	3.90	5.29
Methamphetamines	0.09	0.38	1.01	0.87	3.96	3.20	5.63	4.54
Cocaine	0.24	0.66	1.57	1.26	3.30	3.69	5.14	5.74
Any Drug	10.94	16.54	19.31	22.42	33.14	36.20	41.73	45.31

Table 5. Percentage of Students Who Used ATODs During the Past 30 Days

	Grade 6		Grade 8		Grade 10		Grade 12	
Drug Used	Female	Male	Female	Male	Female	Male	Female	Male
Alcohol	4.86	8.50	17.83	18.10	37.03	35.57	49.34	49.48
Cigarettes	2.27	2.80	8.46	6.45	20.57	17.42	29.11	27.10
Chewing Tobacco	0.75	1.73	2.05	4.25	3.02	13.43	3.80	22.78
Marijuana	0.46	1.22	3.31	4.14	10.78	12.53	14.90	16.13
Inhalants	3.48	5.27	5.23	5.55	3.54	3.63	1.68	2.95
Hallucinogens	0.19	0.44	0.56	0.58	0.85	1.21	0.58	1.88
Methamphetamines	0.00	0.28	0.38	0.38	1.58	0.94	1.71	1.52
Cocaine	0.05	0.37	0.66	0.69	1.06	1.02	0.90	1.31
Any Drug	5.07	7.73	10.00	10.35	16.92	18.32	19.66	21.41

Table 6. Percentage of Students With Heavy Use of Alcohol and Cigarettes

	Grade 6		Grade 8		Grade 10		Grade 12	
Drug Used	Female	Male	Female	Male	Female	Male	Female	Male
Binge Drinking	1.39	2.79	6.20	6.70	20.72	21.07	29.68	36.21
Pack of Cigarettes per Day	0.04	0.17	0.48	0.57	1.79	2.31	3.14	3.73

Table 7. Percentage of Students With Antisocial Behavior in the Past Year

	Grade 6		Grade 8		Grade 10		Grade 12	
Behavior	Female	Male	Female	Male	Female	Male	Female	Male
Suspended from School	1.58	7.05	3.82	10.91	5.68	10.93	3.94	8.37
Drunk or High at School	1.06	1.74	4.12	4.16	12.30	14.07	14.56	19.57
Sold Illegal Drugs	0.35	0.65	1.02	2.64	3.74	7.13	4.62	10.56
Stolen a Vehicle	0.66	1.36	1.61	2.80	2.49	4.06	1.01	3.72
Been Arrested	0.97	2.67	2.30	4.55	3.60	5.78	4.15	7.30
Attacked to Harm	4.54	9.54	6.50	11.82	8.36	13.04	4.69	11.97
Carried a Handgun	2.16	9.44	2.59	9.50	1.94	9.58	1.22	9.99
Handgun to School	0.18	0.55	0.29	0.48	0.07	0.79	0.20	1.06
Drinking and Driving	1.91	3.79	4.83	5.91	15.92	16.33	42.09	42.62
Passenger with Drinking Driver	26.59	26.88	35.04	29.75	50.09	38.57	58.13	51.32
Gambling	13.66	29.66	21.79	45.82	20.34	52.61	19.43	54.79

Table 8. Percentage of Students Reporting Risk									
Risk Factor	Grade 6		Grade 8		Grade 10		Grade 12		
	Female	Male	Female	Male	Female	Male	Female	Male	
Community Domain									
Community Disorganization	30.81	36.30	31.39	30.50	41.32	41.99	38.66	40.57	
Laws & Norms Favor Drug Use	32.47	35.75	26.10	26.33	30.51	34.26	25.44	32.66	
Perceived Availability of Drugs	23.35	26.04	26.93	25.20	40.37	36.29	44.01	42.60	
Perceived Availability of Handguns	19.62	28.99	30.82	41.75	17.31	30.84	19.39	36.76	
Family Domain									
Poor Family Management	25.95	35.68	28.13	28.07	31.18	34.17	25.17	30.16	
Parent Attitudes Favor Drug Use	11.29	17.64	25.97	26.39	44.11	43.97	43.44	49.98	
School Domain									
Low Commitment to School	35.16	54.08	39.95	54.42	49.28	61.87	40.23	55.20	
Peer-Individual Domain									
Early Initiation of ASB	7.19	23.97	13.35	31.81	16.98	35.02	17.15	37.44	
Early Initiation of Drug Use	24.15	34.07	22.44	22.79	29.56	31.83	34.84	39.08	
Attitudes Favorable to ASB	33.52	43.85	27.46	32.40	38.33	52.01	37.34	53.88	
Attitudes Favorable to Drug Use	18.46	25.27	20.63	19.16	32.09	36.60	35.15	43.76	
Low Perceived Risk of Drug Use	22.03	27.38	25.36	30.78	26.92	36.93	30.58	46.02	
Gang Involvement	6.52	10.98	7.51	9.98	5.32	10.88	3.36	8.99	

Table 9. Percentage of Students Reporting Protection									
Protective Factor	Grade 6		Grade 8		Grade 10		Grade 12		
	Female	Male	Female	Male	Female	Male	Female	Male	
Community Domain									
Opportunities for Prosocial Involvement	79.24	77.73	79.43	80.31	72.10	75.35	72.67	76.28	
Family Domain									
Opportunities for Prosocial Involvement	70.95	66.46	67.22	71.73	56.16	62.17	59.35	59.06	
Family Attachment	74.24	69.89	71.96	75.80	69.26	69.26	73.11	68.63	
School Domain									
Opportunities for Prosocial Involvement	75.19	69.18	83.19	80.15	77.66	73.75	76.52	74.23	
Peer-Individual Domain									
Social Skills	85.71	74.49	79.82	71.80	68.55	52.16	76.51	56.45	
Belief in the Moral Order	76.24	59.89	74.58	64.79	74.17	58.08	59.02	35.64	

Risk Factor	Grade 6		Grade 8		Grade 10		Grade 12	
	Female	Male	Female	Male	Female	Male	Female	Male
The last time I drank alcohol I...								
Bought it WITH a Fake ID	4.59	3.16	0.66	2.62	0.19	1.73	0.41	2.15
Bought it WITHOUT a Fake ID	3.06	4.21	2.79	1.99	1.87	4.30	3.19	5.96
Got it From Someone 21 OR OLDER	41.84	48.68	54.12	49.42	65.91	63.01	78.16	75.22
Got it From Someone UNDER 21	21.94	13.95	35.51	29.11	45.30	38.01	39.26	37.98
Got it From a Brother/Sister	13.78	11.32	18.09	18.12	18.49	16.53	15.33	16.57
From Home WITH Parent's Permission	32.65	37.37	24.47	29.11	19.59	17.42	15.74	15.40
From Home WITHOUT Parent's Permission	25.51	22.11	32.31	28.80	27.51	28.40	18.00	19.65
Got it From Another Relative	29.08	27.11	25.40	27.64	19.72	20.94	14.52	16.91
A Stranger Bought it For Me	3.57	4.74	3.59	5.97	9.86	12.83	10.98	17.16
Took it From a Store	1.53	2.37	1.46	4.08	1.80	4.42	1.05	3.57
Other	17.35	15.00	28.06	22.83	22.10	23.03	14.69	18.13
On the last day I had alcohol, I drank at...								
Home	57.50	60.73	44.62	53.21	35.26	38.90	26.56	35.11
Someone Else' Home	44.50	36.65	62.18	54.03	74.37	70.78	79.10	77.53
Open Area	10.50	9.95	17.31	15.09	25.63	28.09	23.90	32.00
Sporting Event or Concert	3.00	2.36	5.64	6.32	6.49	9.68	6.99	12.54
Restaurant or Bar	2.50	4.19	5.90	6.22	5.07	6.71	6.81	8.69
Empty Building or Site	6.00	4.19	3.97	6.32	4.50	7.07	3.52	7.60
Hotel / Motel	6.00	5.76	7.95	8.46	11.43	11.16	12.01	16.15
In a Car	13.50	14.92	20.26	19.16	40.14	33.31	39.67	43.70
One or more Adults Present	54.00	64.40	45.26	48.11	37.96	34.92	38.28	35.95

Risk Factor	Grade 6		Grade 8		Grade 10		Grade 12	
	Female	Male	Female	Male	Female	Male	Female	Male
The last time I smoked a cigarette I...								
Bought it WITH a Fake ID	1.56	2.12	0.69	3.23	1.13	3.23	1.15	3.10
Bought it WITHOUT a Fake ID	3.91	5.82	4.16	6.90	6.87	11.35	26.20	39.44
Got it From Someone 18 OR OLDER	33.59	32.28	47.34	41.16	67.57	60.93	66.44	55.56
Got it From Someone UNDER 18	37.50	30.16	45.96	43.10	49.89	46.95	29.35	25.50
Got it From a Brother/Sister	10.94	11.64	13.39	15.52	13.29	14.22	11.76	10.75
From Home WITH Parent's Permission	12.50	12.70	10.16	10.56	11.60	11.35	8.99	7.83
From Home WITHOUT Parent's Permission	30.47	32.80	30.72	27.80	19.59	19.00	10.42	10.20
Got it From Another Relative	8.59	14.29	13.39	13.79	14.08	15.53	9.08	9.29
A Stranger Bought it For Me	3.91	5.82	5.54	7.54	6.19	10.99	2.87	6.56
Took it From a Store	3.13	8.47	2.77	5.82	2.36	7.65	1.91	4.28
Got it From a Vending Machine	25.00	25.40	21.25	22.41	12.95	16.13	9.27	14.57
On the last day I smoked, I smoked at...								
Home	31.20	35.64	34.93	44.23	37.25	38.37	30.36	33.22
Someone Else' Home	48.80	42.02	52.18	51.78	56.65	49.88	46.68	50.31
Open Area	24.00	31.38	41.27	36.48	44.90	47.91	40.13	46.68
Sporting Event or Concert	4.00	6.38	6.77	10.69	10.98	16.40	12.81	18.25
Restaurant or Bar	2.40	6.38	4.80	8.60	10.42	11.74	17.17	20.11
Empty Building or Site	8.00	11.17	8.08	14.88	10.42	13.60	5.88	11.69
Hotel / Motel	4.00	4.79	6.11	7.76	10.98	11.98	12.62	17.63
In a Car	22.40	20.21	31.00	31.45	61.86	55.00	72.58	65.19
One or more Adults Present	15.20	13.83	16.59	16.56	21.84	18.26	24.95	30.91

Contacts for Prevention

Nebraska Partners in Prevention State Incentive Cooperative Agreement (SICA)

Laurie Barger Sutter, SICA Director
laurie.sutter@hhs.state.ne.us
(402) 479-5573 phone
P.O. Box 98925
Lincoln, NE 68509-8925
(402) 479-5162 fax
<http://www.nebraskaprevention.gov>

Nebraska Office of Mental Health, Substance Abuse and Addiction Services

Nebraska Health and Human Service System
Laurie Barger Sutter, Behavioral Health Prevention
Program Manager
laurie.sutter@hhs.state.ne.us
P.O. Box 98925
Lincoln, NE 68509-8925
(402) 479-5573 phone
(402) 479-5162 fax
http://www.hhs.state.ne.us/sua/beh_sua.htm

Nebraska Department of Education

Safe and Drug Free Schools Program
Karen Stevens, Director
karen.stevens@nde.state.ne.us
P.O. Box 94987
Lincoln, NE 68509-4987
(402) 471-2448 phone
(402) 471-0117 fax
<http://www.nde.state.ne.us/SDFS/Home.html>

Tobacco Free Nebraska

Nebraska Health and Human Service System
Judy Martin, Administrator
judy.martin@hhs.state.ne.us
P.O. Box 95044
Lincoln, NE 68509-95044
(402) 471-3489 phone
(402) 471-6446 fax
<http://www.hhs.state.ne.us/tfn/tfnindex.htm>

Nebraska Office of Highway Safety

Nebraska Department of Motor Vehicles
Fred Zwonechek, Administrator
fzwonech@notes.state.ne.us
P.O. Box 94612
Lincoln NE 68509-4612
(402) 471-2515 phone
(402) 471-3865 fax
<http://www.dmv.state.ne.us/highwaysafety>

Nebraska Commission on Law Enforcement and Criminal Justice

Allen Curtis, Executive Director
acurtis@crimecom.state.ne.us
Nancy Steeves, Grants Administrator
nsteeves@crimecom.state.ne.us
P.O. Box 94946
Lincoln, NE 68509-4946
(402) 471-2194 phone
(402) 471-2837 fax
<http://www.state.ne.us/home/crimecom/>

U.S. Attorney's Office

Joe Jeanette, Manager
Law Enforcement and Community
Coordination
joe.jeanette@usdoj.gov
(402) 661-3700 phone
(800) 889-9124 phone
First National Bank Building
1620 Dodge St, Suite 1400
Omaha NE 68102
(402) 661-3082 fax
<http://www.usdoj.gov/usao/ne/>

This Report was Prepared for the State of Nebraska by Bach Harrison, L.L.C.

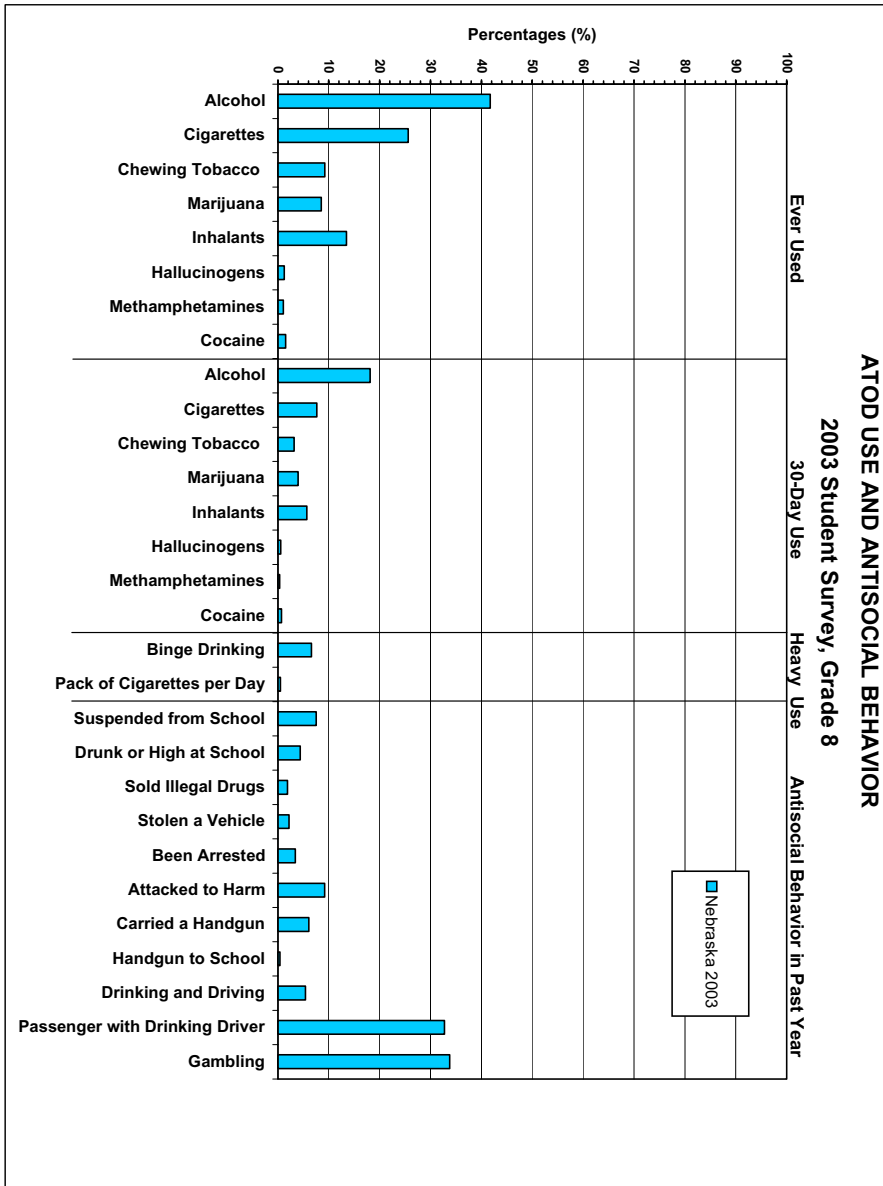
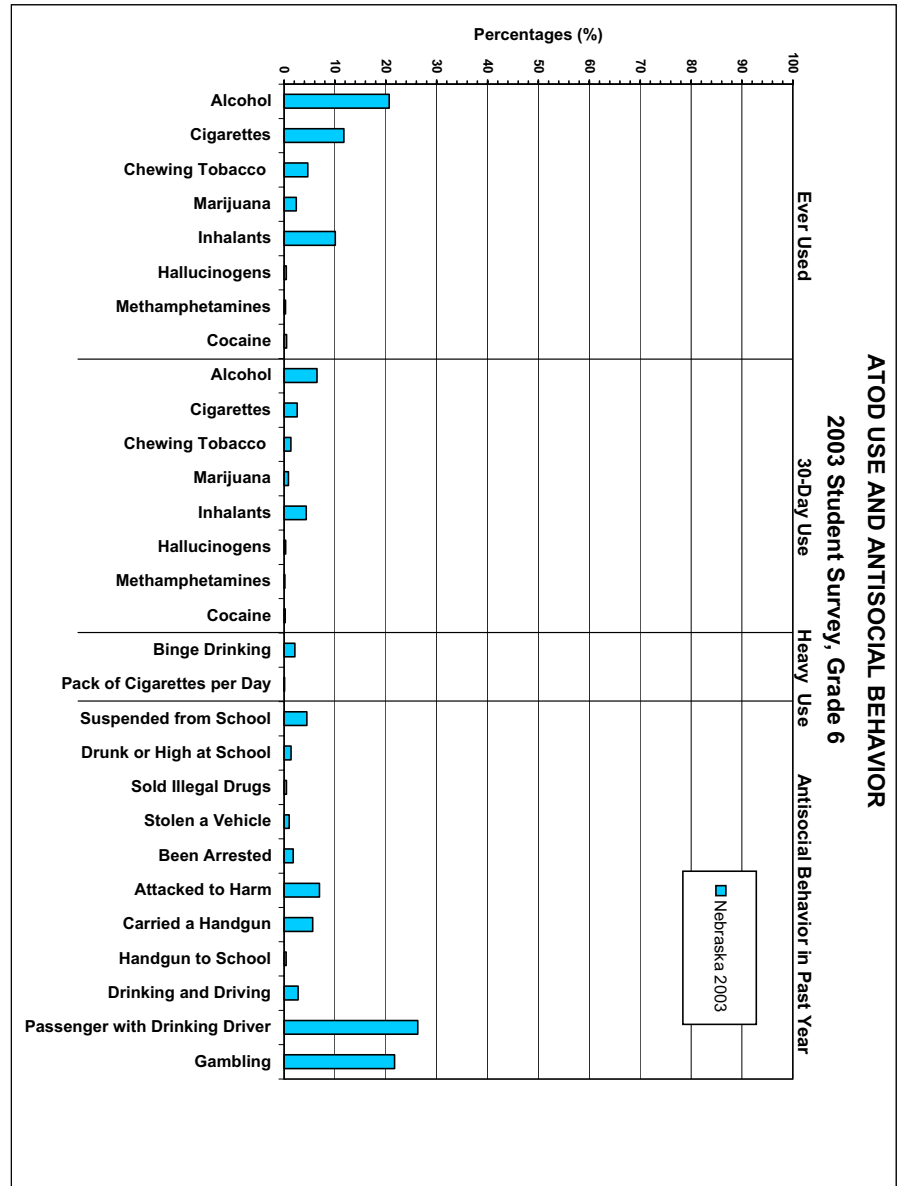
R. Steven Harrison, Ph.D.
R. Paris Bach-Harrison, BFA
paris@bach-harrison.com
757 East South Temple, Suite 120
Salt Lake City, Utah 84102
(801) 359-2064 phone
(801) 524-9688 fax

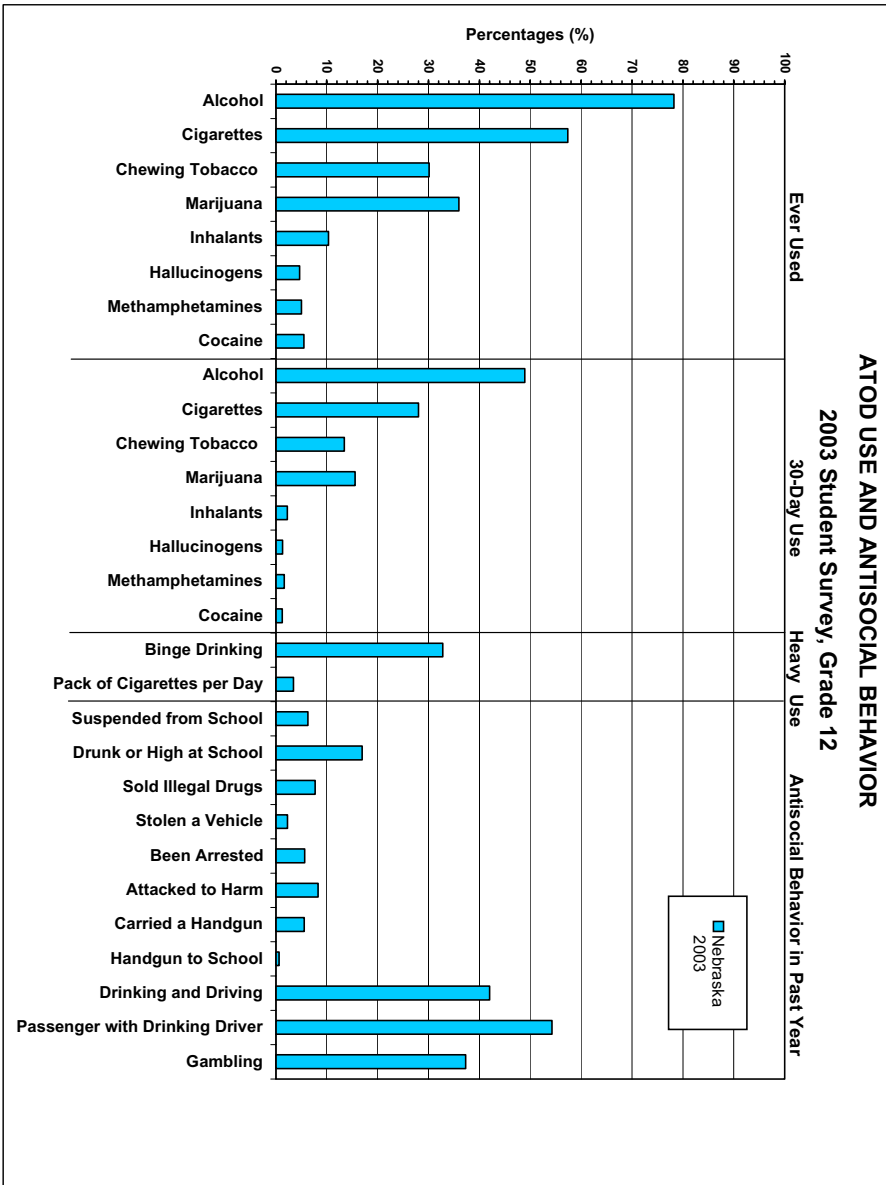
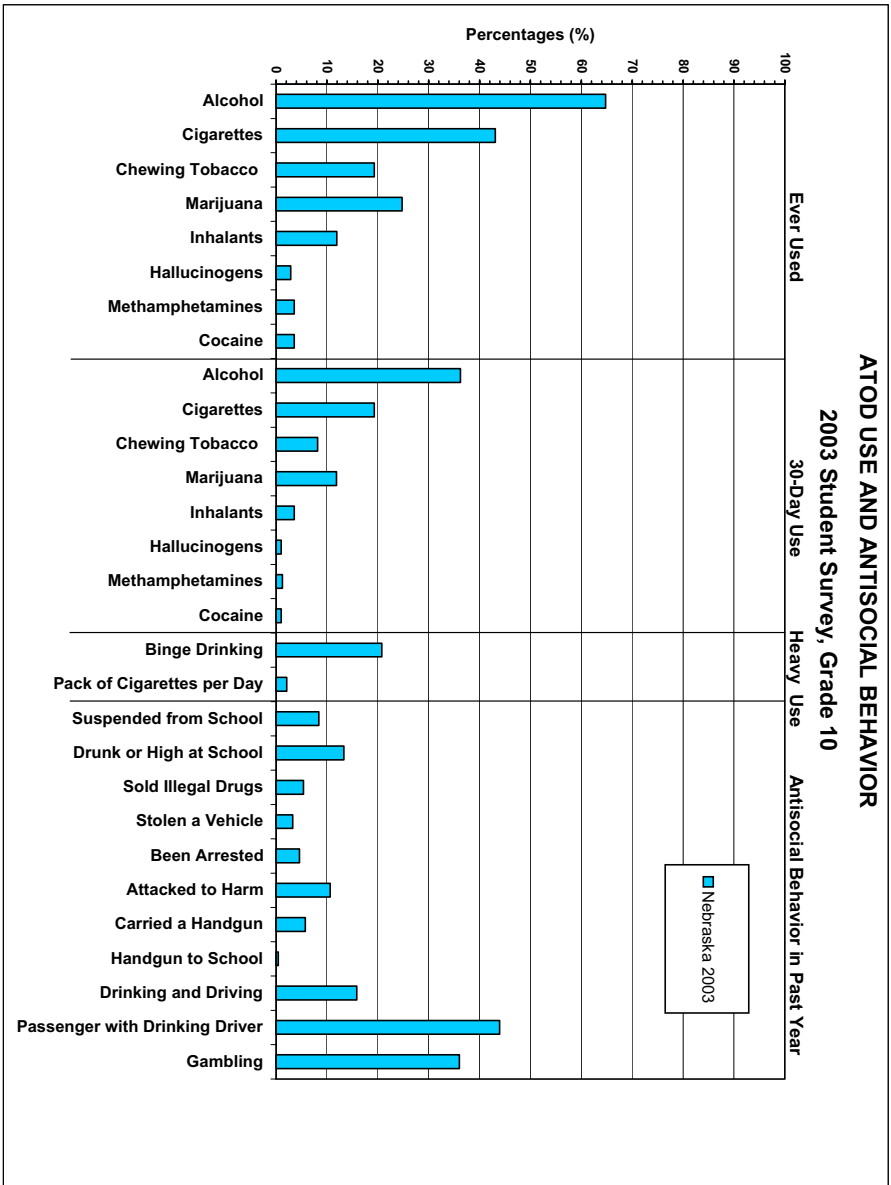
Nebraska Risk and Protective Factor Student Survey Results for 2003

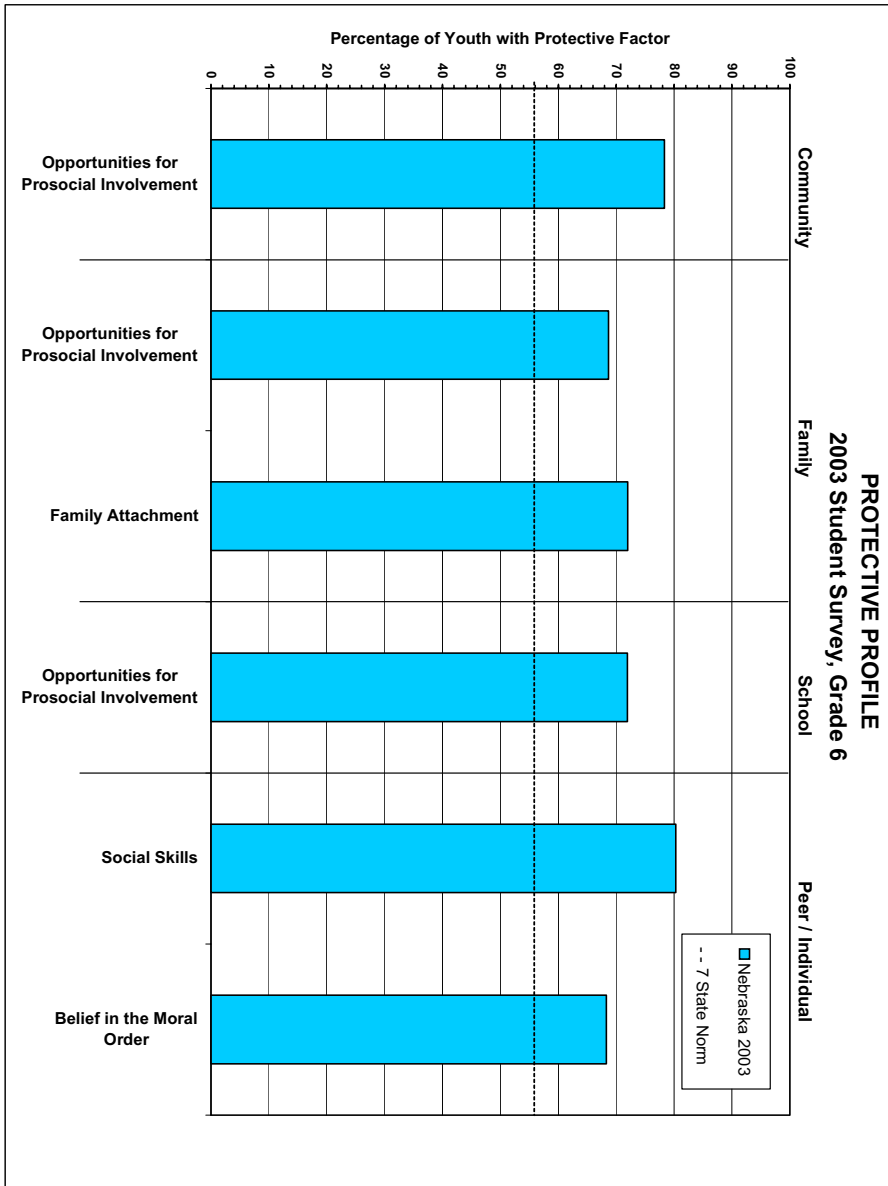
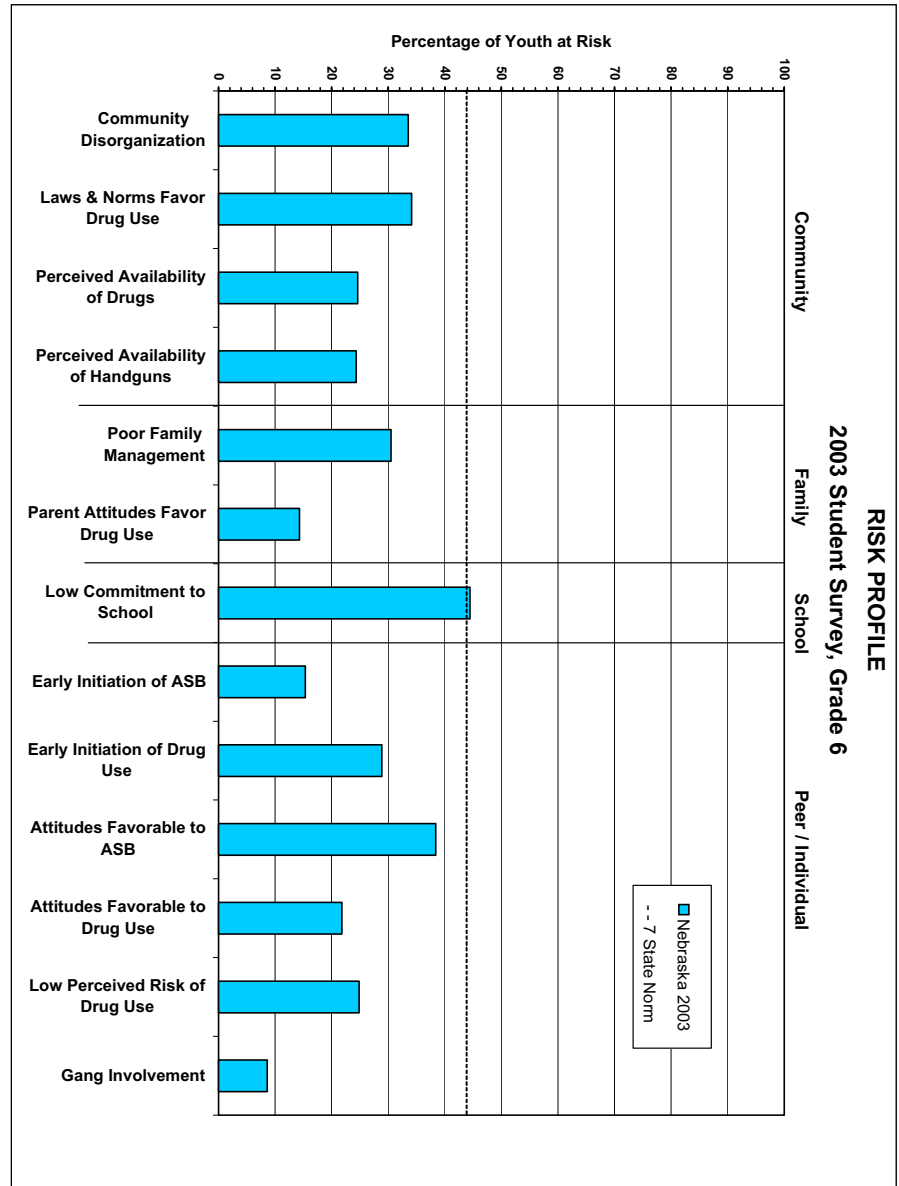
State Totals Profile Report

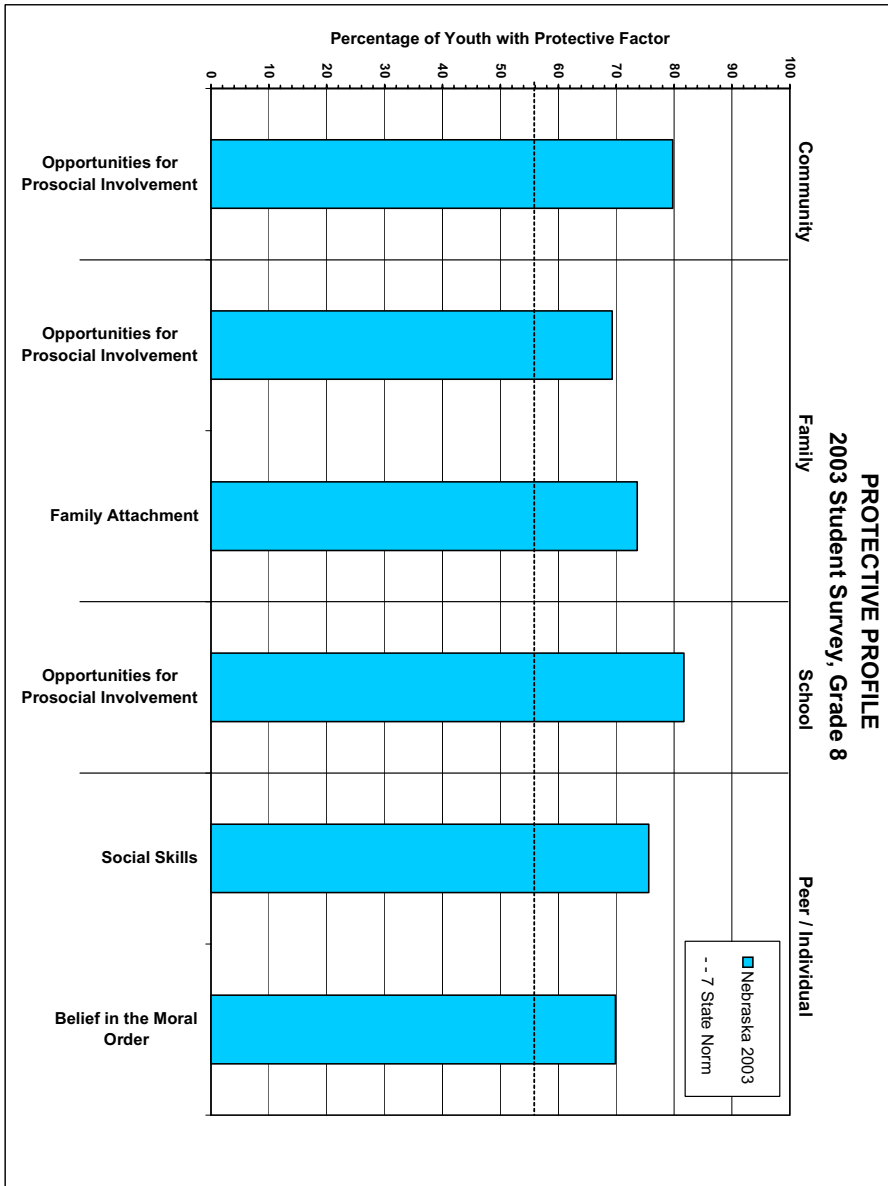
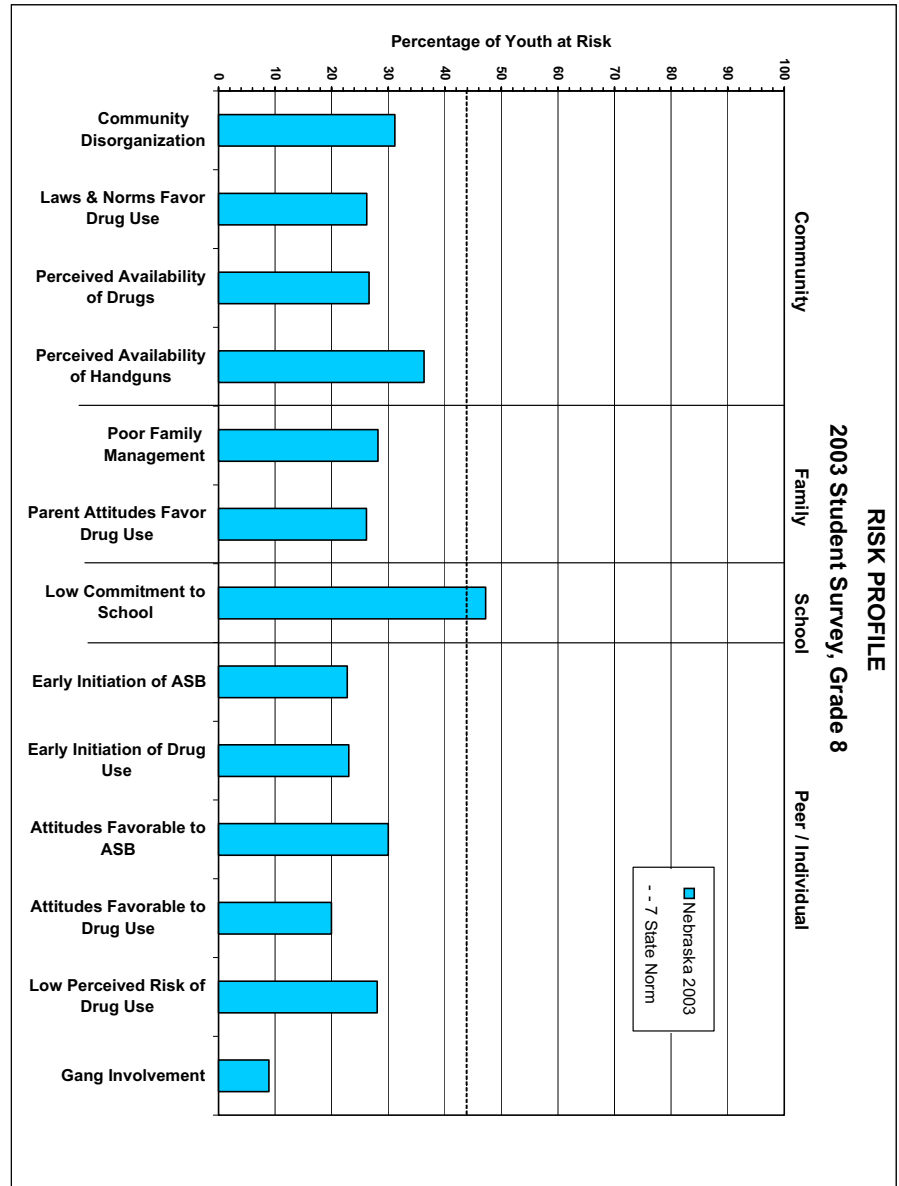


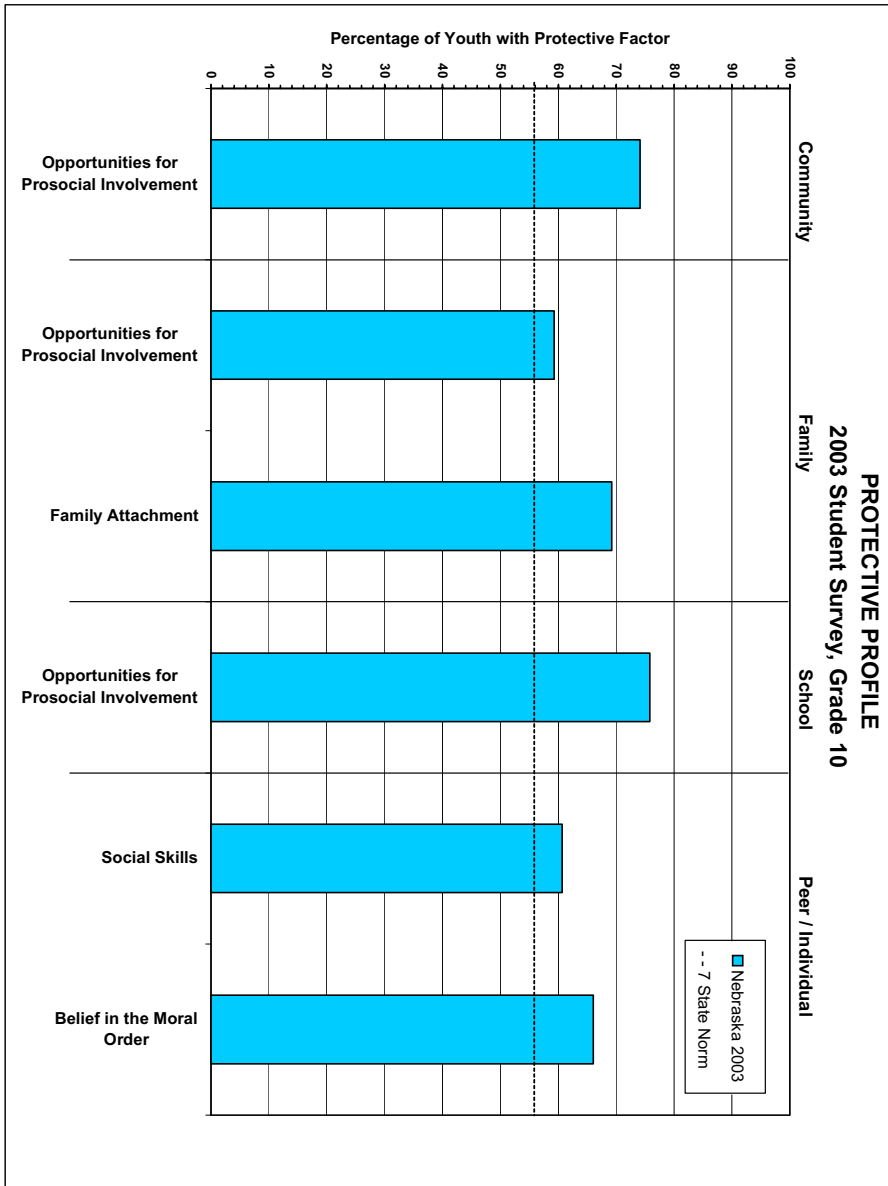
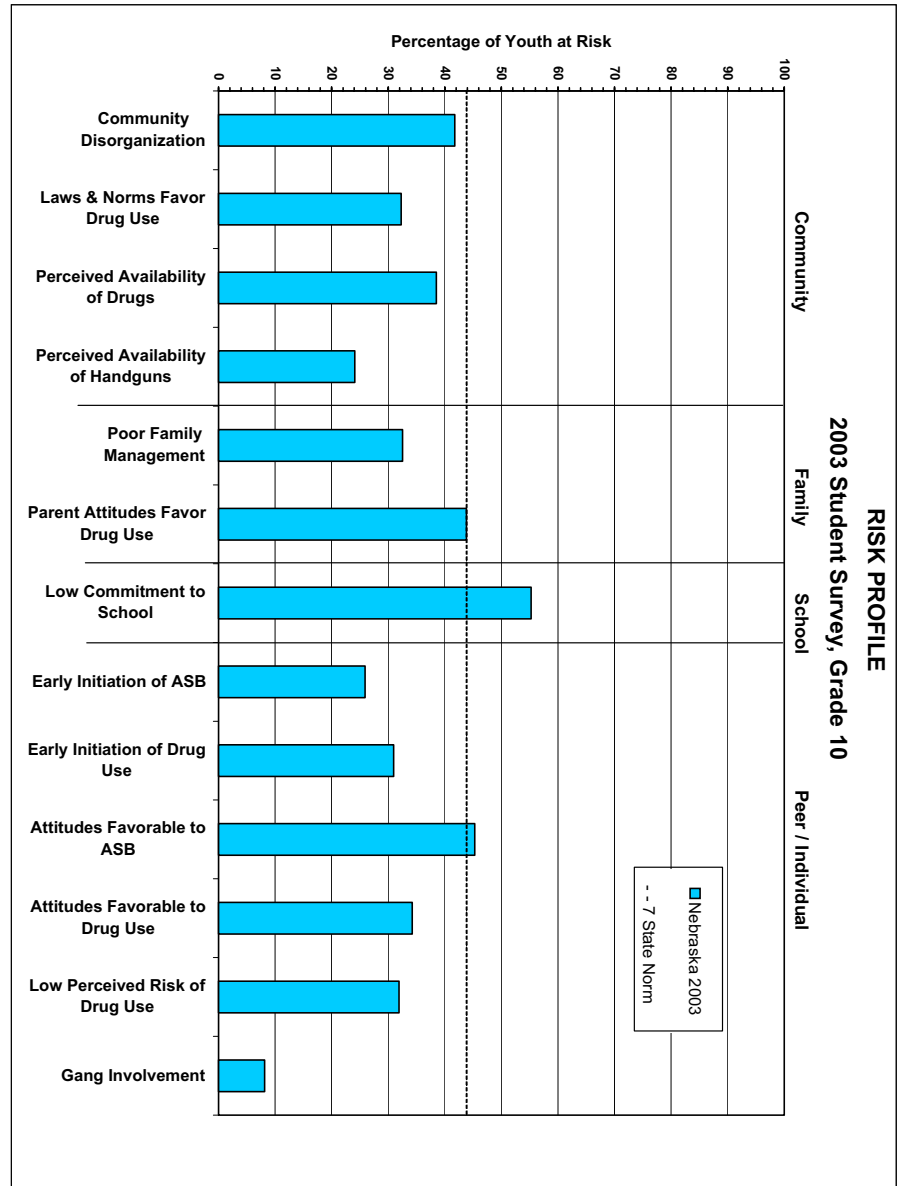
Administered by the Nebraska Health and
Human Services System and the
Nebraska Department of Education for
Nebraska Partners in Prevention

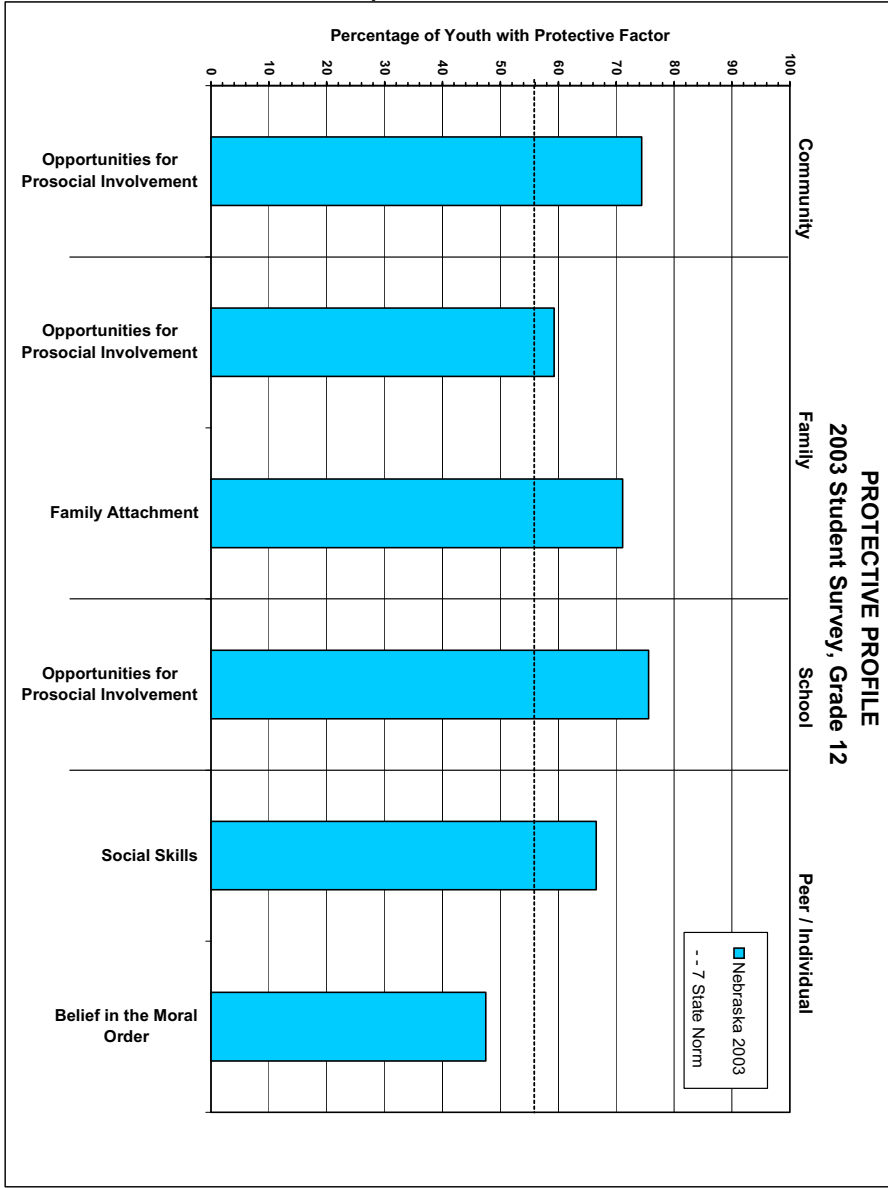
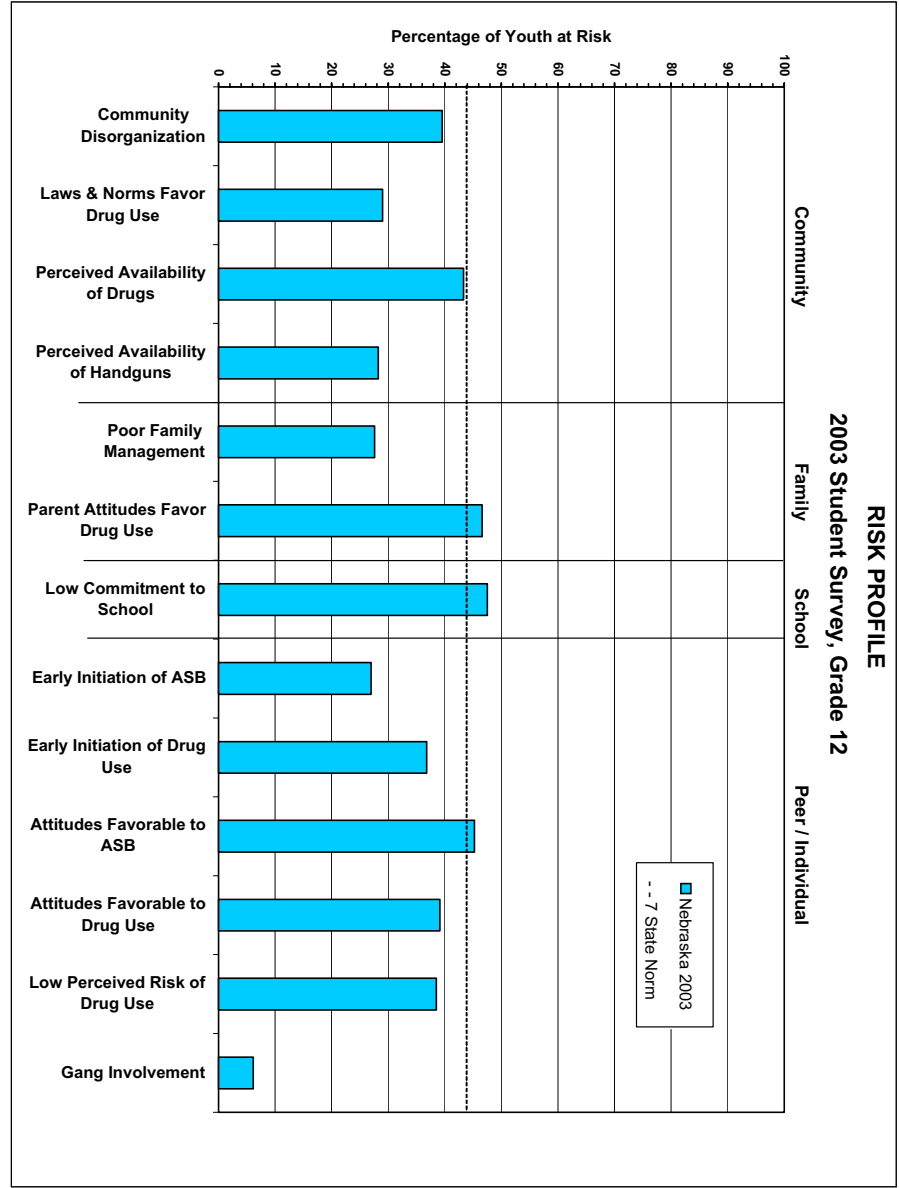


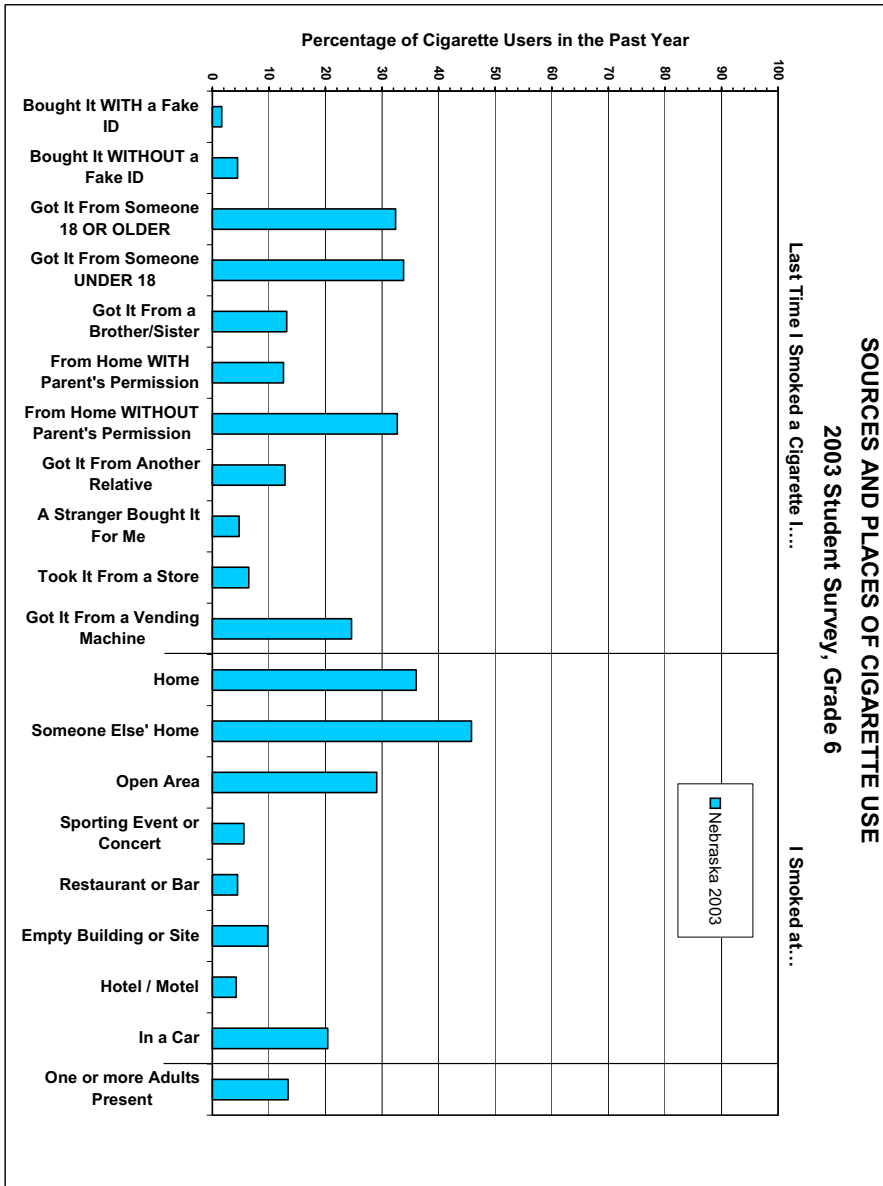
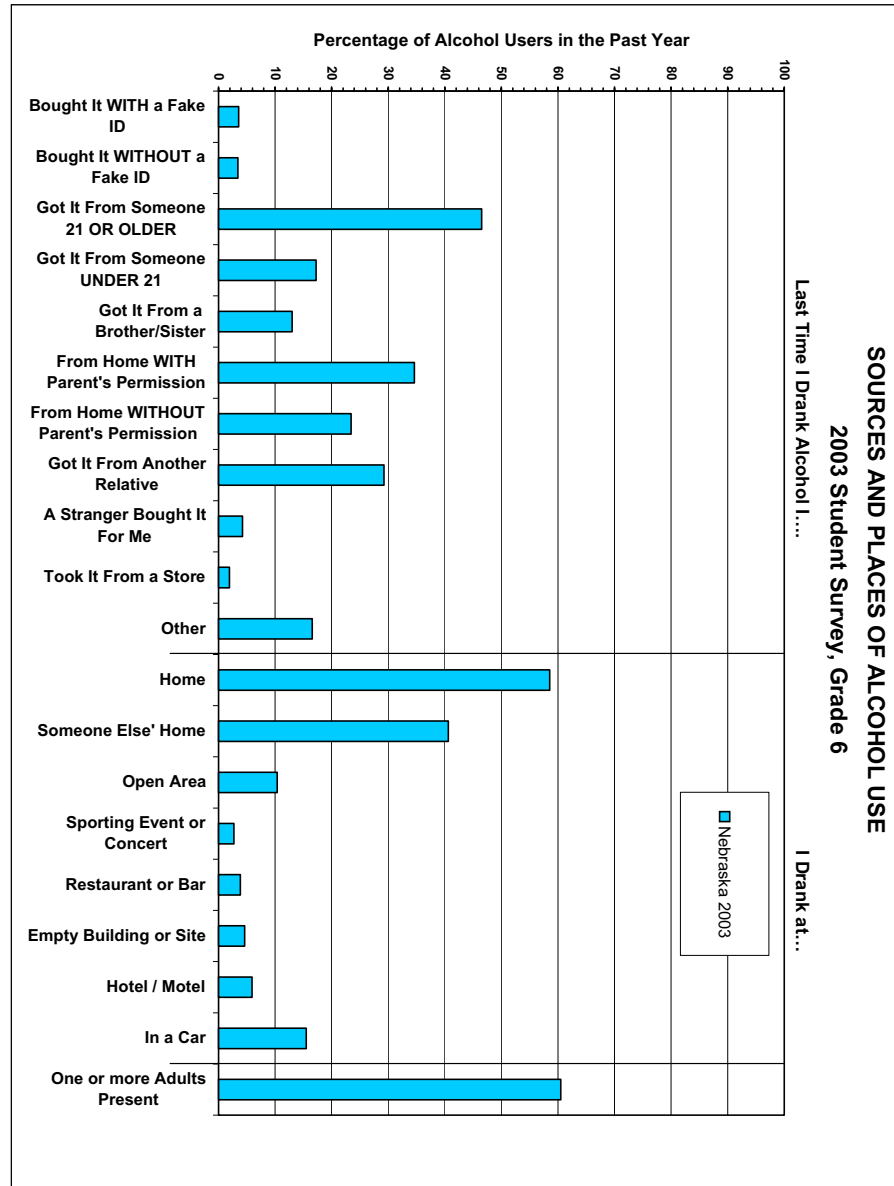


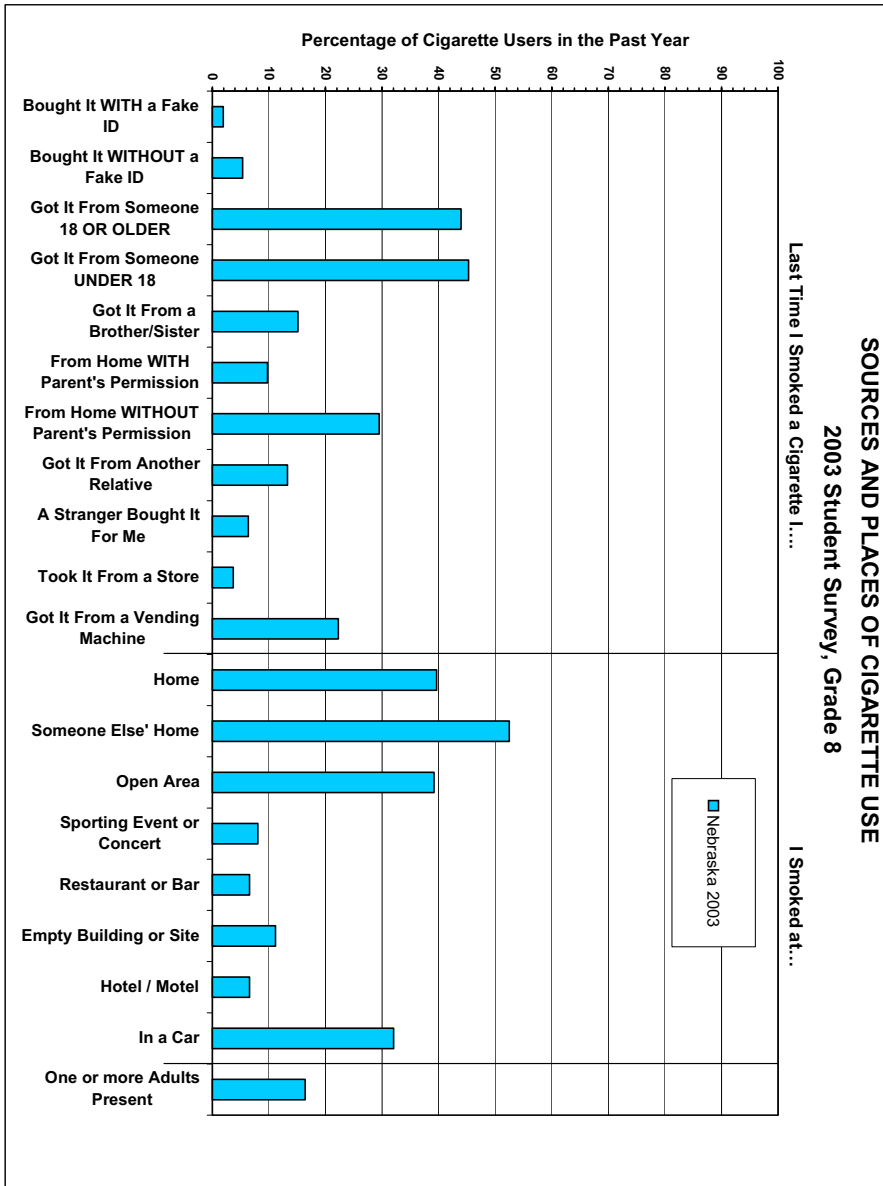
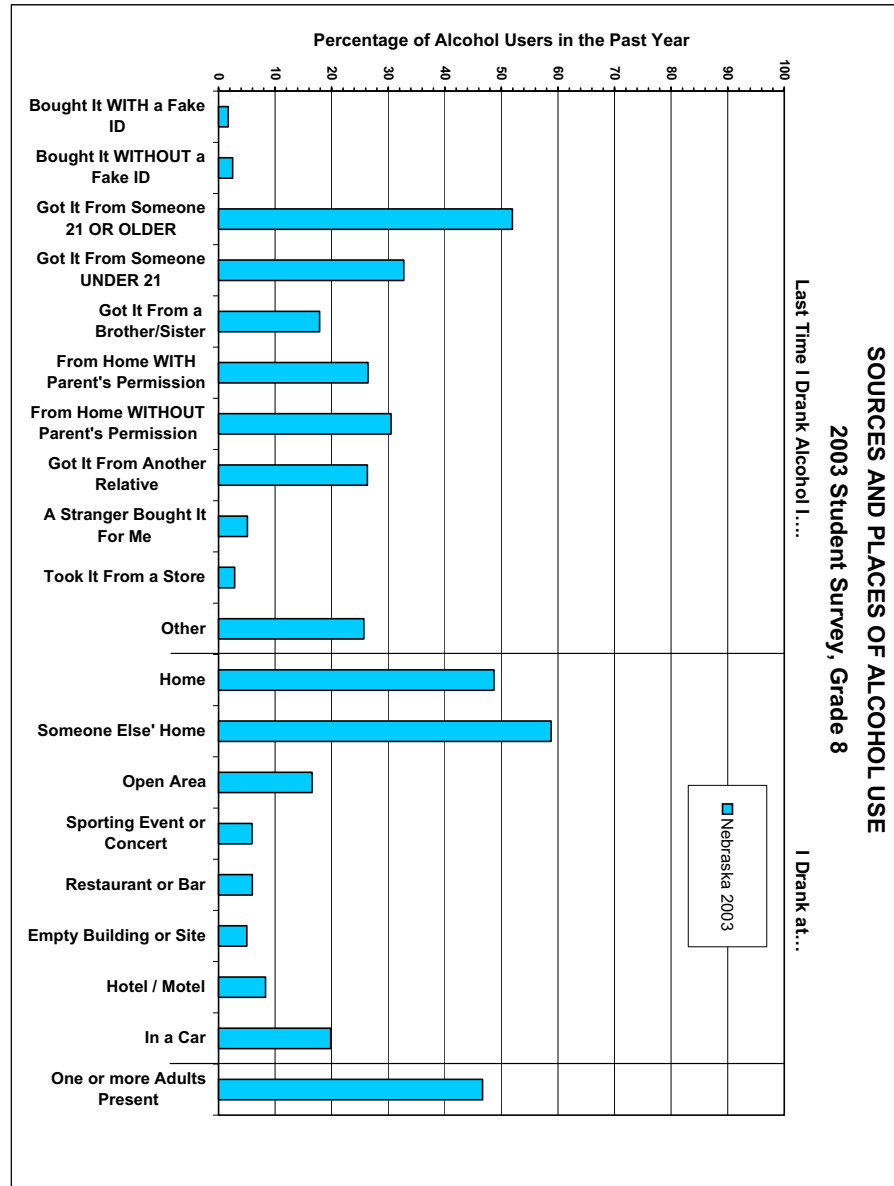


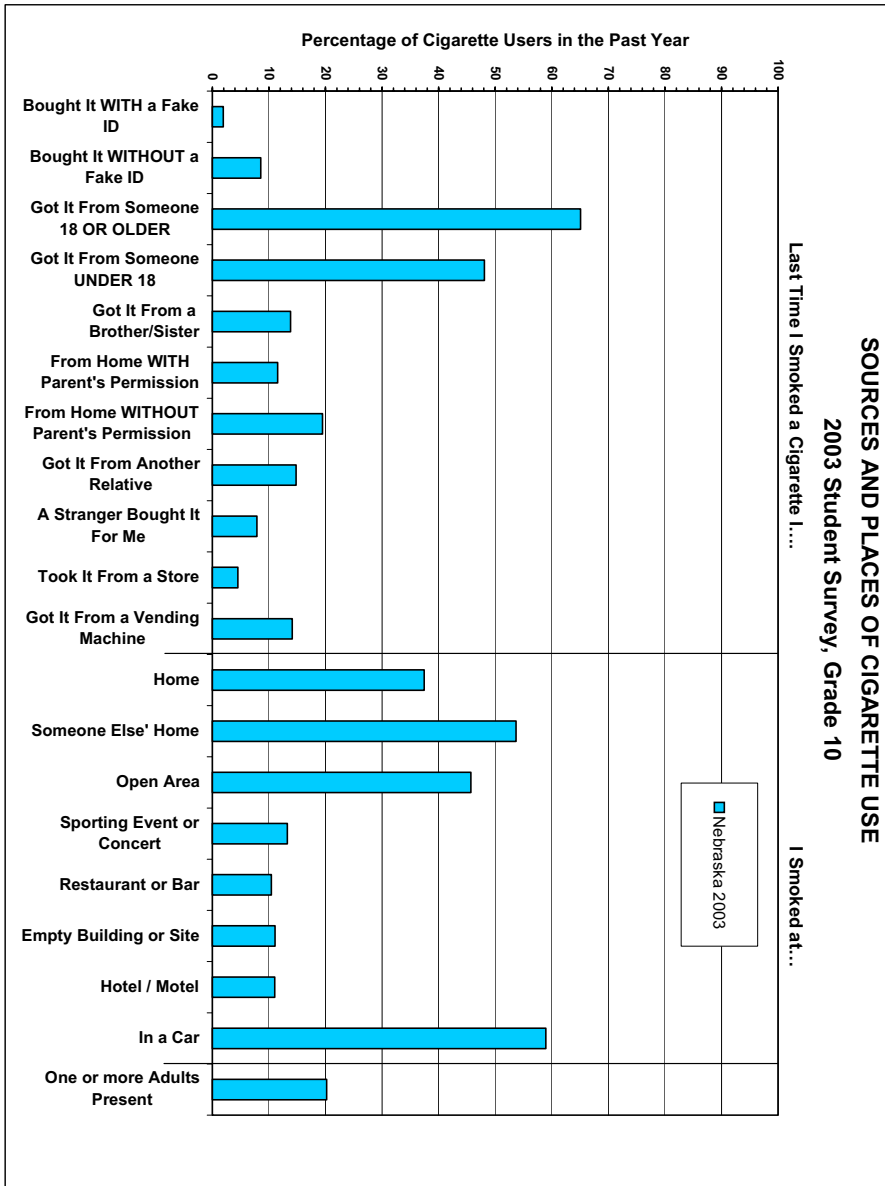
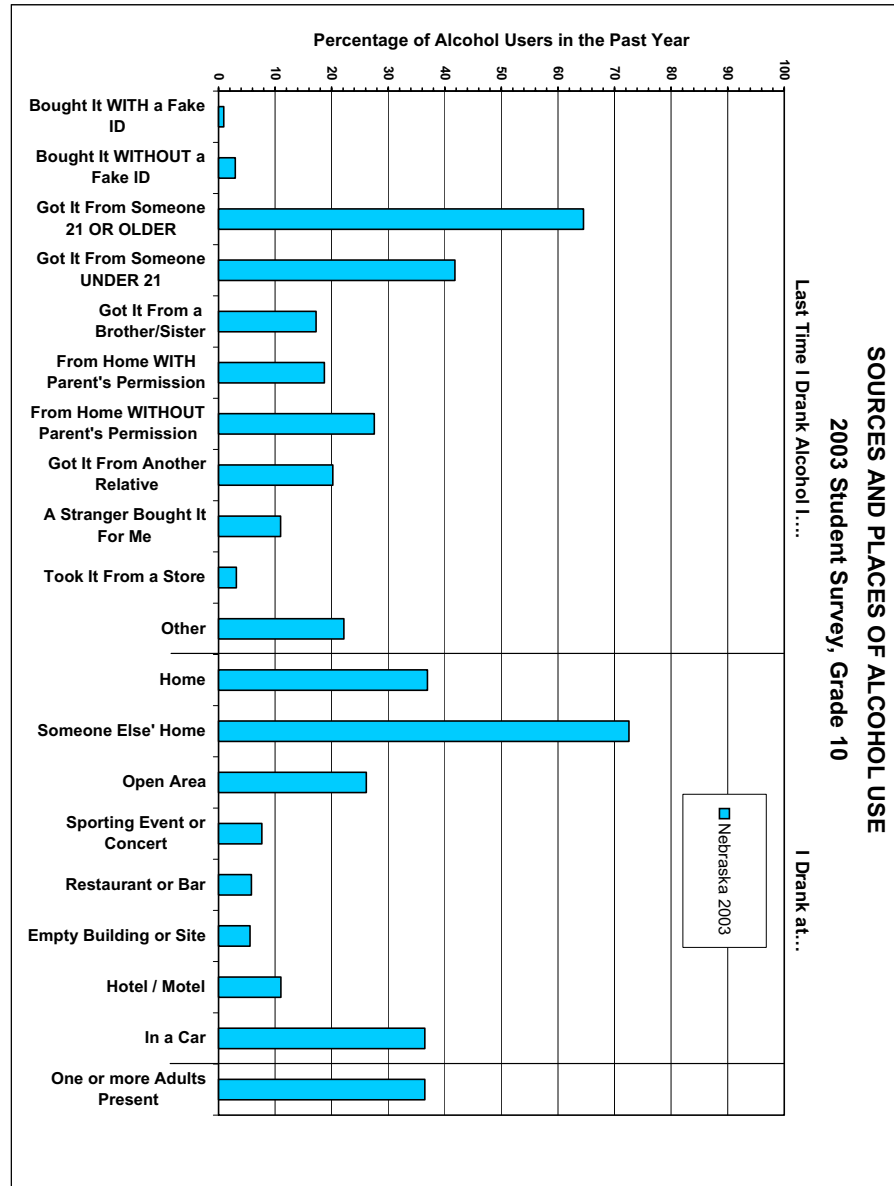












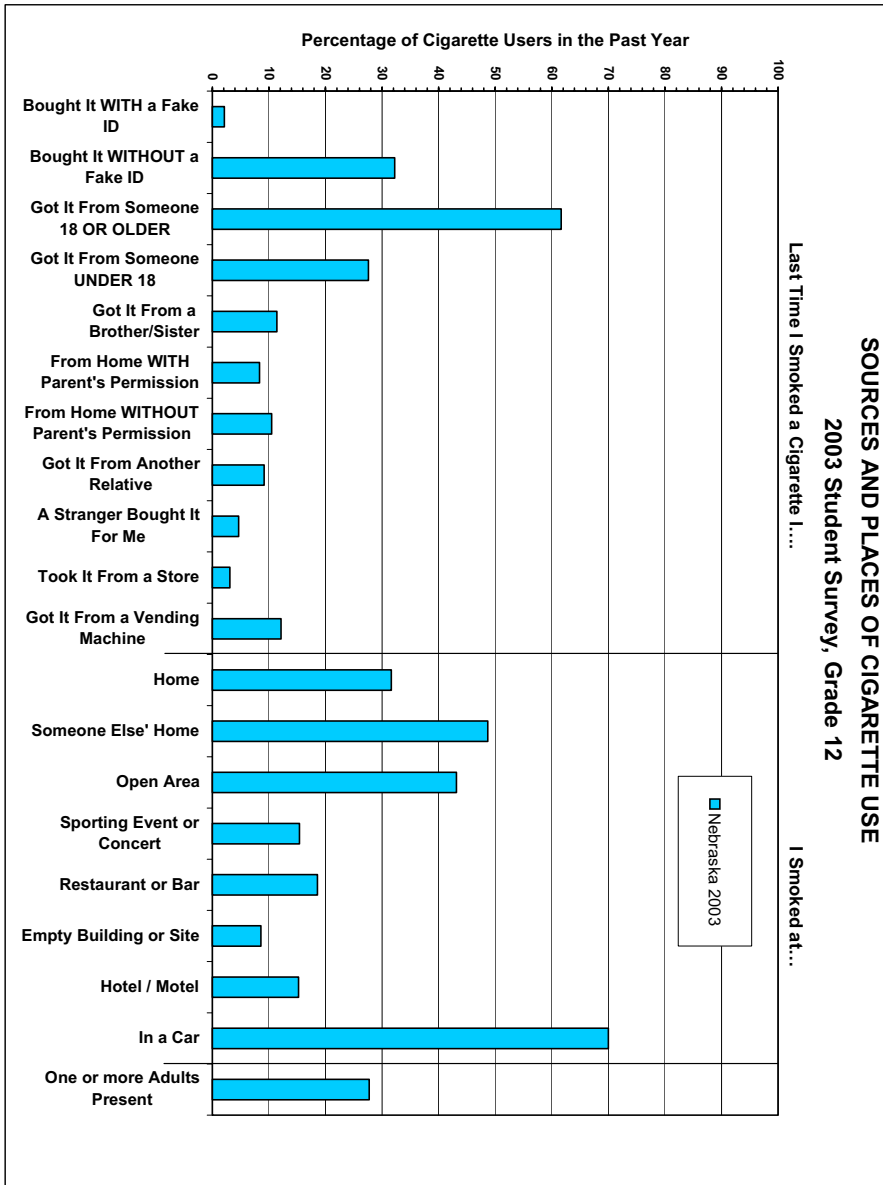
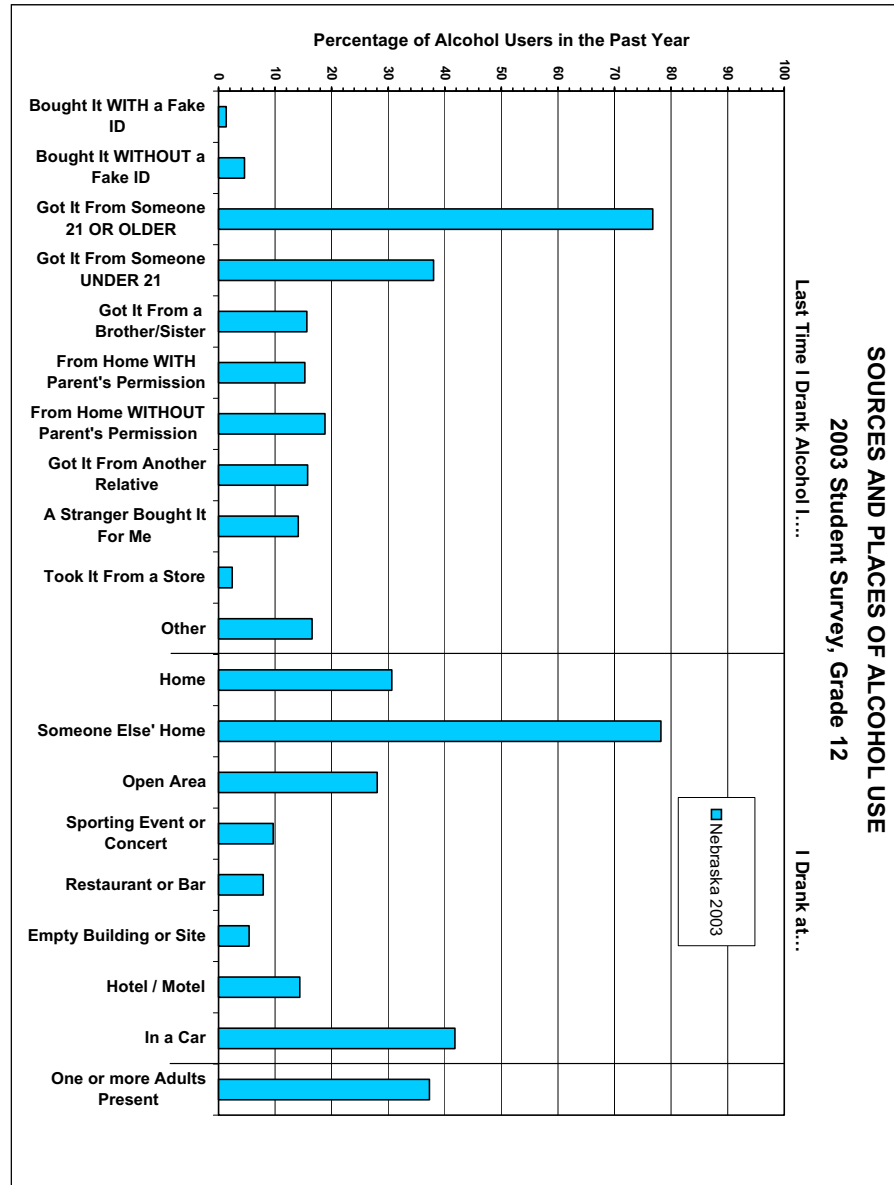


Table 3. Number of Students Who Completed the Survey

	Grade 6		Grade 8		Grade 10		Grade 12	
	Community	State	Community	State	Community	State	Community	State
Number of Youth	0	5951	0	7045	0	6520	0	5892

Table 4. Percentage of Students Who Used ATODs During Their Lifetime

	Grade 6		Grade 8		Grade 10		Grade 12	
Drug Used	Community	State	Community	State	Community	State	Community	State
Alcohol	0.00	20.67	0.00	41.74	0.00	64.77	0.00	78.25
Cigarettes	0.00	11.73	0.00	25.61	0.00	43.12	0.00	57.37
Chewing Tobacco	0.00	4.68	0.00	9.25	0.00	19.30	0.00	30.08
Marijuana	0.00	2.39	0.00	8.53	0.00	24.76	0.00	35.96
Inhalants	0.00	10.06	0.00	13.48	0.00	11.95	0.00	10.34
Hallucinogens	0.00	0.42	0.00	1.26	0.00	2.87	0.00	4.67
Methamphetamines	0.00	0.28	0.00	1.04	0.00	3.56	0.00	5.03
Cocaine	0.00	0.50	0.00	1.52	0.00	3.56	0.00	5.51
Any Drug	0.00	13.55	0.00	21.29	0.00	34.53	0.00	42.87

Table 5. Percentage of Students Who Used ATODs During the Past 30 Days

	Grade 6		Grade 8		Grade 10		Grade 12	
Drug Used	Community	State	Community	State	Community	State	Community	State
Alcohol	0.00	6.50	0.00	18.12	0.00	36.22	0.00	48.91
Cigarettes	0.00	2.60	0.00	7.67	0.00	19.28	0.00	28.03
Chewing Tobacco	0.00	1.32	0.00	3.19	0.00	8.17	0.00	13.42
Marijuana	0.00	0.87	0.00	3.97	0.00	11.87	0.00	15.56
Inhalants	0.00	4.38	0.00	5.68	0.00	3.57	0.00	2.24
Hallucinogens	0.00	0.33	0.00	0.55	0.00	1.03	0.00	1.31
Methamphetamines	0.00	0.16	0.00	0.37	0.00	1.25	0.00	1.66
Cocaine	0.00	0.23	0.00	0.71	0.00	1.04	0.00	1.28
Any Drug	0.00	6.35	0.00	10.44	0.00	17.64	0.00	20.36

Table 6. Percentage of Students With Heavy Use of Alcohol and Cigarettes

	Grade 6		Grade 8		Grade 10		Grade 12	
Drug Used	Community	State	Community	State	Community	State	Community	State
Binge Drinking	0.00	2.12	0.00	6.61	0.00	20.77	0.00	32.80
Pack of Cigarettes per Day	0.00	0.10	0.00	0.50	0.00	2.09	0.00	3.44

Table 7. Percentage of Students With Antisocial Behavior in the Past Year

	Grade 6		Grade 8		Grade 10		Grade 12	
Behavior	Community	State	Community	State	Community	State	Community	State
Suspended from School	0.00	4.50	0.00	7.56	0.00	8.41	0.00	6.27
Drunk or High at School	0.00	1.39	0.00	4.40	0.00	13.33	0.00	16.95
Sold Illegal Drugs	0.00	0.48	0.00	1.90	0.00	5.40	0.00	7.68
Stolen a Vehicle	0.00	1.03	0.00	2.20	0.00	3.27	0.00	2.27
Been Arrested	0.00	1.82	0.00	3.43	0.00	4.61	0.00	5.66
Attacked to Harm	0.00	6.95	0.00	9.21	0.00	10.64	0.00	8.28
Carried a Handgun	0.00	5.63	0.00	6.09	0.00	5.75	0.00	5.58
Handgun to School	0.00	0.38	0.00	0.37	0.00	0.43	0.00	0.62
Drinking and Driving	0.00	2.74	0.00	5.41	0.00	15.86	0.00	42.02
Passenger with Drinking Driver	0.00	26.30	0.00	32.72	0.00	43.93	0.00	54.28
Gambling	0.00	21.72	0.00	33.75	0.00	36.02	0.00	37.31

Table 8. Percentage of Students Reporting Risk									
Risk Factor	Grade 6		Grade 8		Grade 10		Grade 12		
	Community	State	Community	State	Community	State	Community	State	
Community Domain									
Community Disorganization	0.00	33.55	0.00	31.15	0.00	41.77	0.00	39.54	
Laws & Norms Favor Drug Use	0.00	34.15	0.00	26.22	0.00	32.29	0.00	29.03	
Perceived Availability of Drugs	0.00	24.58	0.00	26.62	0.00	38.51	0.00	43.31	
Perceived Availability of Handguns	0.00	24.36	0.00	36.31	0.00	24.08	0.00	28.24	
Family Domain									
Poor Family Management	0.00	30.49	0.00	28.21	0.00	32.54	0.00	27.60	
Parent Attitudes Favor Drug Use	0.00	14.32	0.00	26.15	0.00	43.80	0.00	46.62	
School Domain									
Low Commitment to School	0.00	44.46	0.00	47.22	0.00	55.27	0.00	47.53	
Peer-Individual Domain									
Early Initiation of ASB	0.00	15.35	0.00	22.74	0.00	25.90	0.00	26.96	
Early Initiation of Drug Use	0.00	28.88	0.00	23.06	0.00	30.94	0.00	36.79	
Attitudes Favorable to ASB	0.00	38.43	0.00	29.99	0.00	45.29	0.00	45.24	
Attitudes Favorable to Drug Use	0.00	21.79	0.00	19.95	0.00	34.23	0.00	39.12	
Low Perceived Risk of Drug Use	0.00	24.83	0.00	28.05	0.00	31.92	0.00	38.52	
Gang Involvement	0.00	8.63	0.00	8.91	0.00	8.15	0.00	6.16	

Table 9. Percentage of Students Reporting Protection									
Protective Factor	Grade 6		Grade 8		Grade 10		Grade 12		
	Community	State	Community	State	Community	State	Community	State	
Community Domain									
Opportunities for Prosocial Involvement	0.00	78.33	0.00	79.76	0.00	74.11	0.00	74.41	
Family Domain									
Opportunities for Prosocial Involvement	0.00	68.70	0.00	69.31	0.00	59.27	0.00	59.28	
Family Attachment	0.00	71.99	0.00	73.61	0.00	69.24	0.00	71.10	
School Domain									
Opportunities for Prosocial Involvement	0.00	71.92	0.00	81.70	0.00	75.78	0.00	75.60	
Peer-Individual Domain									
Social Skills	0.00	80.29	0.00	75.61	0.00	60.69	0.00	66.55	
Belief in the Moral Order	0.00	68.30	0.00	69.85	0.00	66.05	0.00	47.48	

Risk Factor	Grade 6		Grade 8		Grade 10		Grade 12	
	Community	State	Community	State	Community	State	Community	State
The last time I drank alcohol I...								
Bought it WITH a Fake ID	0.00	3.58	0.00	1.72	0.00	0.92	0.00	1.37
Bought it WITHOUT a Fake ID	0.00	3.41	0.00	2.50	0.00	2.98	0.00	4.58
Got it From Someone 21 OR OLDER	0.00	46.50	0.00	51.93	0.00	64.53	0.00	76.77
Got it From Someone UNDER 21	0.00	17.24	0.00	32.74	0.00	41.80	0.00	38.03
Got it From a Brother/Sister	0.00	13.01	0.00	17.88	0.00	17.23	0.00	15.62
From Home WITH Parent's Permission	0.00	34.63	0.00	26.43	0.00	18.72	0.00	15.27
From Home WITHOUT Parent's Permission	0.00	23.41	0.00	30.50	0.00	27.51	0.00	18.83
Got it From Another Relative	0.00	29.27	0.00	26.33	0.00	20.21	0.00	15.75
A Stranger Bought it For Me	0.00	4.23	0.00	5.11	0.00	10.99	0.00	14.10
Took it From a Store	0.00	1.95	0.00	2.87	0.00	3.15	0.00	2.44
Other	0.00	16.59	0.00	25.70	0.00	22.16	0.00	16.54
On the last day I had alcohol, I drank at...								
Home	0.00	58.56	0.00	48.71	0.00	36.94	0.00	30.64
Someone Else' Home	0.00	40.64	0.00	58.80	0.00	72.53	0.00	78.18
Open Area	0.00	10.40	0.00	16.54	0.00	26.13	0.00	28.04
Sporting Event or Concert	0.00	2.72	0.00	5.94	0.00	7.67	0.00	9.70
Restaurant or Bar	0.00	3.84	0.00	5.99	0.00	5.82	0.00	7.90
Empty Building or Site	0.00	4.64	0.00	5.02	0.00	5.59	0.00	5.42
Hotel / Motel	0.00	5.92	0.00	8.32	0.00	11.01	0.00	14.37
In a Car	0.00	15.52	0.00	19.84	0.00	36.45	0.00	41.79
One or more Adults Present	0.00	60.48	0.00	46.68	0.00	36.48	0.00	37.29

Table 11. Percentage of Students Reporting Cigarette Use									
Risk Factor	Grade 6		Grade 8		Grade 10		Grade 12		
	Community	State	Community	State	Community	State	Community	State	
The last time I smoked a cigarette I...									
Bought it WITH a Fake ID	0.00	1.68	0.00	1.95	0.00	1.94	0.00	2.11	
Bought it WITHOUT a Fake ID	0.00	4.47	0.00	5.37	0.00	8.56	0.00	32.24	
Got it From Someone 18 OR OLDER	0.00	32.40	0.00	43.95	0.00	65.07	0.00	61.66	
Got it From Someone UNDER 18	0.00	33.80	0.00	45.31	0.00	48.11	0.00	27.58	
Got it From a Brother/Sister	0.00	13.13	0.00	15.14	0.00	13.81	0.00	11.42	
From Home WITH Parent's Permission	0.00	12.57	0.00	9.77	0.00	11.55	0.00	8.34	
From Home WITHOUT Parent's Permission	0.00	32.68	0.00	29.49	0.00	19.49	0.00	10.50	
Got it From Another Relative	0.00	12.85	0.00	13.28	0.00	14.81	0.00	9.13	
A Stranger Bought it For Me	0.00	4.75	0.00	6.35	0.00	7.88	0.00	4.66	
Took it From a Store	0.00	6.42	0.00	3.71	0.00	4.52	0.00	3.12	
Got it From a Vending Machine	0.00	24.58	0.00	22.27	0.00	14.13	0.00	12.17	
On the last day I smoked, I smoked at...									
Home	0.00	36.03	0.00	39.64	0.00	37.44	0.00	31.62	
Someone Else' Home	0.00	45.81	0.00	52.48	0.00	53.69	0.00	48.71	
Open Area	0.00	29.05	0.00	39.18	0.00	45.69	0.00	43.14	
Sporting Event or Concert	0.00	5.59	0.00	8.06	0.00	13.25	0.00	15.40	
Restaurant or Bar	0.00	4.47	0.00	6.56	0.00	10.42	0.00	18.59	
Empty Building or Site	0.00	9.78	0.00	11.15	0.00	11.09	0.00	8.58	
Hotel / Motel	0.00	4.19	0.00	6.56	0.00	11.04	0.00	15.23	
In a Car	0.00	20.39	0.00	32.05	0.00	58.95	0.00	70.02	
One or more Adults Present	0.00	13.41	0.00	16.40	0.00	20.22	0.00	27.74	



